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EDITORIAL COMMENT



LIVING CONDITIONS IN HOSPITALS FOR SPECIAL DUTY NURSES

THE letter from X. Y. Z. found in the letter department of this issue opens a question for discussion which will interest equally the superintendents of training schools and the nurses doing special duty in hospitals. The picture drawn in this letter is not over-done, as it applies to some hospitals we have known about, but we know, also, a few where the women in charge of the schools have taken advantage of the opportunity afforded by the erection of new buildings to provide very complete quarters for outside specialists. We have seen one hospital where there was ample dressing room space, with a separate locker for each nurse, and where a special dining room was provided, small, but quiet, with good meals attractively served.

It would be interesting if we could know through the pages of the *JOURNAL* what provision for specialists the hospitals of the country are providing. Twelve-hour duty for such nurses is rapidly becoming an established custom in hospitals of good repute, and no good institution permits nurses to undress in the patient's room and get what sleep they can by lying on a cot in a wrapper. But of course there are great numbers of small, poor, or commercial institutions where such conditions as these still exist.

While such intelligent criticisms as the one in hand do not come to us often, complaints from hospitals of the trials of having to call in graduate specialists to do out service are not unusual. Too often such nurses disregard rules and regulations and, although taking splendid care of their patients, are a disturbing element in the school and this is

the reason why many excellent nurses are not called in for special duty in their own hospitals. "She is a good nurse, but she would not do for this case," is not an unusual answer when only one name remains on a directory list.

In nursing almost more than in anything else, the personal element enters largely into the matter of success, and this is true in every department of the work. No amount of training will counteract serious faults due to early home neglect or to the lack of education. One thing that state registration is aiming to do is to fix standards for training schools that shall help to eliminate the personally unfit, and though no rules and regulations from the outside can accomplish this without the co-operation of the heads of the schools, it serves as one more check upon the hospitals that think only of getting their work done cheaply when they consider applicants, and graduate types of women whom they are not willing to call back into their schools when once they are outside.

CARE OF MALE PATIENTS IN HOTELS

ANOTHER subject which needs discussion and airing at alumnus and state meetings, as well as in this magazine, is the question of the accommodation provided for nurses while caring for men in hotels. It has always seemed to us degrading for a nurse to care for a man who is alone in a hotel where a separate room is not provided for her accommodation. She certainly loses the respect of the hotel employees when she consents to live in the room with her patient, with only such privacy for dressing, bathing, etc., as can be secured by a screen, a closet or an adjoining bath-room, and with her only sleeping place a cot in the room. Such patients should properly be removed to a hospital, and alcoholic cases should be in charge of a male nurse.

While in the earlier days nurses accepted such conditions as were presented to them, feeling that they must, we have come to realize that it is a rare exception when they need be tolerated and that through concerted action, and the wise guidance which may come through a properly-conducted central registry, they need not be. There are cases where a man overcome by illness cannot be moved and must be cared for in a hotel, but a nurse has a right to insist that an adjoining room shall be provided for her use.

MALICIOUS CRITICISM

In our last issue we referred to a comment which had appeared in *The Hospital*, an English publication, reviewing the third and fourth volumes of "A History of Nursing" in a spirit of ridicule. As Miss

Netting's name was mentioned in this criticism, she has sent the following letter to the editor of that publication, which we give in full and the sentiment of which we endorse:

"TEACHERS COLLEGE, COLUMBIA UNIVERSITY, NEW YORK CITY,

"May 7, 1913.

"TO THE EDITOR OF *The Hospital*,
89 Southampton Street, Strand,
London, England.

"DEAR SIR:

"My attention has been called to a review of the 'History of Nursing,' Volume III and IV, published in your issue of March 8. This review appears to me to be not only markedly unfair and misleading, but to have been written in a deeply hostile spirit and solely for the purpose of discrediting the 'History.' I therefore deem it my duty to try to correct as far as I am able some at least of the mistaken impressions which the review might leave in the minds of your readers.

"Your reviewer intimates that the history has been written by a 'small clique' . . . who have collaborated in 'mutual laudation,' and in 'depreciation of all opponents.' He calls it a 'farrago of prejudice masquerading as history,' and adds the grave accusation that its 'misrepresentations of facts alone are sufficient to condemn it.' Let me reply in the interests of truth and accuracy that the history has not been written as your reviewer intimates by a 'small clique' but by a very large number of women in various countries, nurses who have helped to make the history of nursing and can speak from an intimate and full knowledge of the work and events in which they have participated.

"To whom, pray, would you turn for accurate information concerning nursing but to those nurses whose ability and devotion to their calling has led them to study its problems for the purpose of improving it and rendering it more efficient? And so far from being 'animated by prejudice,' the attitude of the writers from various countries seems on the whole moderate and unrestrained. Doubtless unpleasant truths are presented. It would be difficult indeed to write any true history of nursing during the past quarter of a century, at least, which would form pleasant reading for those, who, in hospitals or out of them, have been concerned with that enterprise which we can only truthfully call the exploitation of nurses. The historian of the future who will have access to the facts will probably have to present a still less pleasant picture. In

questioning the veracity of the various authors, your reviewer should be specific in his statements, and thus enable the authors to reply to him.

"As my name appears in the review, the opportunity is given, which I gladly use, to state that I believe Volume III and IV are history in a much truer sense than the first two volumes, since in the latter access has been had to first-hand sources. And in this connection let me add that my share in the production of these first volumes is entirely insignificant compared with that contributed by Miss Deck. The history would never have appeared at all had it not been for the generous and liberal way in which Miss Deck took hold of the plan and worked it out, devoting her full time for nearly two years to the task, and bringing to it a great amount of careful research and study, and that freshness, spontaneity, and originality which has characterized all of her writings. There is no literary value in the book except that which has been contributed by Miss Deck.

"Let me further say that I would have highly valued the honor of being associated with Miss Deck in the production of the last two volumes. The idea of these volumes is entirely hers, the work in securing, arranging, and editing the material is hers, that of preparing it for publication is all hers, and the proceeds which come from these books she has, with characteristic generosity, presented to the International Council of Nurses. To many of us the only real defect of the last volumes is the omission of any reference whatever to the large, important, and uniquely valuable share which Miss Deck has had in the development of nursing in this country. It is doubtful to my mind if any one of our number has rendered greater service than she has rendered and for the benefit of future generations of nurses this lack in the history should in some way be supplied.

"I shall be indebted to you if you will kindly publish this in an early issue of your journal and would say that I am also sending a copy to the 'British Journal of Nursing.'

"Believe me,

"Faithfully yours,

"(Signed) **ABELAINE NUTTINS.**"

PROGRESS OF STATE REGISTRATION

THE California bill has been signed by the governor and is considered by those most deeply concerned to be a most satisfactory measure. Registration is placed under the supervision of the Board of Health.

The new Illinois bill has passed both houses, and as we go to press we have not heard whether or not it has been signed by the governor. We shall hope to give the text of both of these bills in our next issue.

A CORRECTION

We hope only a few of our readers noticed the mistake on the announcement page of the June JOURNAL by which the name of the president of a state association was substituted for that of the president of the JOURNAL directors. Some one, forgetting that every word in the JOURNAL has to be submitted to the editors at Rochester, sent at the eleventh hour, to the Philadelphia office, a change of address for the official department. This fell into the hands of an employee not familiar with the routine, who evidently thought there could be but one president, and that person, of course, the JOURNAL president, and behold the astonishing result!

With the growth of the JOURNAL the amount of detail in making up and printing a number has become quite tremendous. Dozens of nurses contribute the items, and from the beginning of the process to the end several hundred people have a hand in it. To issue what is really a monthly newspaper requires accuracy, promptness, an established routine, and that each person shall be familiar with the peculiar demands of the JOURNAL. While such errors as this are trying to the soul of those responsible for the work, they will sometimes occur.

PELLAGRA

Dr C. H. LAVINDER,

Surgeon, United States Public Health Service

WHILE a comparatively new disease in the United States, pellagra has been known and studied in Europe for nearly two centuries. The credit for its first description is almost universally ascribed to Gaspar Casal, a Spanish physician, who first observed the malady in the Province of the Asturias, in Northern Spain, early in the eighteenth century. It was called by Casal *mal de la rosa*, or the rose disease. About twenty years later the disease was noticed and described in Northern Italy. It was given various names until Frapelli of Milan, in 1771, first applied to it the name "pellagra." In the early part of the nineteenth century the same affection was reported from France, and later from Roumania, Egypt, and other places in Southern Europe.

The United States, apparently, for many years remained singularly free from this malady. Sporadic cases are found in the literature as early as 1864, but the reports are very meagre. In the latter part of 1906 and early 1907, succeeding a report by Searcy of an epidemic in the Mount Vernon (Alabama) Asylum for Negroes, the disease was reported by a number of observers, and independently identified by both Babcock and Watson as identical with the Italian disease. The malady was then rapidly recognized as rather extensively present in several of the Southern States, and occurred also in Illinois and in some other states.

The apparently sudden appearance and undue prevalence in America of so striking a disease are worthy of note. Similar occurrences, however, have been recorded in the history of other striking diseases, and the history of the advance of pellagra in Southern Europe early in the eighteenth century bears a marked similarity to what has occurred in the United States. While we now know that pellagra has undoubtedly occurred, at least sporadically, in the United States for many years, it is hardly credible that it could have been overlooked had it shown anything like the prevalence of the last five or six years.

In almost every place where it has appeared, pellagra has proven a serious menace to the health and well-being of certain classes of the population, and it is no exaggeration to say that it has been, and still is, a veritable scourge in certain parts of Southern Europe. It seems

not unlikely that parts, at least, of the United States may have a similar experience.

The disease at the present time is most prevalent in parts of Italy, Austria, Roumania, Egypt, and the United States, though it is also found in many other places as well. According to official statistics, pellagra reached its high tide in Italy in 1881, when there occurred nearly 100,000 cases in the entire kingdom. Since then there has been a steady decrease, and at present there are reported less than 50,000 cases. Up to recent years Italy also reported from 2500 to 4000 deaths annually from the disease, but this number is now, of course, greatly decreased. Certain parts of Austria and Roumania can show equally distressing conditions.

While accurate and extensive data are lacking in the United States, yet from a recent inquiry made by myself, under the direction of the Surgeon-General of the Public Health Service, it may be safely asserted that from 1907 to 1911, both inclusive, there have occurred in the United States at least 30,000 cases of the disease, with a case fatality rate approximating 40 per cent. And it is to be remembered that pellagra was a negligible quantity in the medical annals of this country up to about the beginning of 1907. The area of its greatest prevalence in the United States lies in the Southeastern States; roughly speaking, those states which lie south of the Potomac and Ohio and east of the Mississippi river, with Louisiana, Texas and Arkansas included. A reference to the map will show the general distribution of the disease in the United States. The malady has rapidly increased and extended its territory, and so far as can be judged in the absence of statistics, this increase and extension continues. The chart shows the rapidity of its increase as based on reports from eight of the worst affected states. While pellagra numerically cannot be compared with such a disease as typhoid fever in this country, yet in the face of such figures as those above quoted, the gravity of the situation admits no denial.

Etiology.—The cause of pellagra is obscure, but the disease nevertheless has almost unanimously been regarded as a food poisoning, allied to ergotism, and attributed to the use of Indian corn or maize as an article of diet. The corn theory originated almost with the discovery of the disease, and from that time until now it has held a dominant place in the consideration of its etiology.

It has long been customary to divide in a general way the theories regarding the cause of pellagra into two schools, the advocates of the corn theory being called *zeisists* (from *Zea Mays*) and the opposition

antiscists. These two words serve often a useful purpose, but are likely to lead readers astray. It is not to be understood from them that there are only two theories of the cause of pellagra. On the contrary, there are scores of theories. The scists agree in one thing only and that is that either directly or indirectly pellagra is etiologically related to maize; while the antiscists agree in one thing only, and that is that the disease bears no such relation to maize. The scists, however, do not agree among themselves nor do the antiscists show any more harmony in their views. Without going into the details of the various theories and shades of opinion, it may be said that the great struggle now centres around the question: Is pellagra a kind of food poisoning from maize or is it due to some parasite infecting the human body?

The most prevalent scist idea is that pellagra is a chronic intoxication "produced by poisons developed in spoiled corn through the action of certain micro-organisms, in themselves harmless to man." This conception of course includes some consideration of spoiled corn. It has been shown that to speak of spoiled corn is not to be very definite, since in the spoiling of corn there occur complex and not always uniform chemical changes. Corn is a poorly protected grain and readily undergoes deterioration. In this state it furnishes a good culture medium for both bacteria and moulds, with the production by them of toxic substances. It can be shown that these toxic substances produce changes in animals, but as yet no one has been able to produce with them anything which can be considered as comparable to pellagra in man. Among other important scist theories, the most popular, perhaps, is the idea that the disease is an autointoxication of some kind connected with the metabolism of corn or corn products in the human organism. Then there are still some who think that pellagra is due to a specific micro-organism ingested with spoiled corn. In addition, there is an idea that pellagra is a photodynamic disease, and that corn possesses some soluble toxic product which, circulating in the blood stream, is harmless until sensitized by the chemical rays of the sunlight.

Without going into further details, we may turn now to the antiscists. Exclusive of the view that pellagra is not a morbid entity, but is only a symptom complex, the most important development in antiscistic thought is the theory of Hammon. According to this author, pellagra is an infectious disease, caused perhaps by some protozoal parasite transmitted through the agency of a blood-sucking insect. The parasite is hypothetical but the transmitting agent, according to Hammon, is some one or more species of *simulium* or buffalo gnat. In conformity

with the life history of this insect, pellagra, according to this view, must be closely linked to the running stream since this insect breeds only in such streams. This theory, as well as other antisemitic theories, at present cannot be said to rest on secure scientific foundations.

From a careful view of the entire subject it is probably safe to assert that in any definite, scientific sense the cause of pellagra is unknown. The supposed relation of the disease to corn can, however, neither be lightly cast aside nor held with dogmatic adherence.

It may be added here that certain predisposing etiological factors are of importance. It is noticeable in Italy that the disease is almost exclusively confined to the field laborer. This is, however, not so marked in America. Previous illness, depressing conditions and unsanitary surroundings, with poor food, also predispose to the disease. Climatic and seasonal conditions are likewise of importance, as will appear later.

The contagiousness of pellagra may be mentioned at this point. This has very naturally been a matter of much concern. So long as the etiology of the disease is unknown, it is of course impossible to make positive statements, but those who have had longest experience do not regard the disease as transmissible from one person to another. In Italy no precautions of quarantine or isolation are practised, and the sick associate intimately with the well. Doctors, nurses, and others in attendance on the sick do not contract the disease. In the present state of our knowledge, measures of quarantine or isolation do not seem to the writer wise or necessary. They serve only to increase an already wide-spread pellagrophobia.

If communicable at all, pellagra certainly does not seem to be so in any very direct way from one individual to another. Evidence is not lacking that pellagra is possibly a disease of place or locality, somewhat after the apparent nature of beriberi. This, however, does not necessarily imply anything as to its transmissibility.

Symptomatology and Diagnosis.—Pellagra appears to be a chronic intoxication, and is characterized clinically by a chronic course with the periodic manifestations of acute symptoms referable to the gastrointestinal tract and the nervous system, as well as by the appearance of an erythema on exposed body surfaces. It not infrequently leads to insanity or to a fatal cachexia.

The disease is very variable in its manifestations, but is consistent in its development and is a distinct morbid entity. For purposes of description it has long been customary to divide its symptomatology into stages or periods. The simplest of these divisions is prodromal,

first, second, and third stages. These divisions, however, are to a large extent arbitrary. There is no sharp line of demarcation between the stages, nothing is implied as to the length of time, and the stages represent rather differences in degree than in kind. The disease is essentially chronic, but acute conditions, as will be mentioned later, are also described. Pellagra runs its course in a series of periodic attacks—alternating ameliorations and exacerbations. The exacerbations occur usually in the spring, sometimes in the fall, occasionally at other seasons, and subside after a time only to recur again the next year. The brunt of the successive attacks is largely borne by the nervous system, and each annual recurrence leaves a deeper impression upon the nervous and mental condition of the patient.

The prodromal stage is indefinite both in length of time and symptomatology. Fleeting pains, paresthesias, neurasthenic phenomena, mild gastro-intestinal disturbances, vertigo, progressive muscular weakness, loss of appetite, and general malaise may all be seen at this time. Pronounced symptoms usually appear in the spring or fall.

The first stage usually concerns the gastro-intestinal disturbances and the erythema. Changes in the appetite, burning in the mouth and stomach, and pyalism are often noticed. The tongue is usually coated, with red tip and edges, the papillae frequently prominent and injected, sometimes it is smooth and red, and again marked by fissures. There is present also, frequently, a marked stomatitis. Dyspepsia, flatulency, abdominal pains, and occasional vomiting are also seen. Diarrhea is very frequent and at times is dysenteric in character. Muscular weakness, especially of the lower extremities, is often evident. The temperature is usually normal. Vertigo, headache, insomnia, various neuralgias and cramp-like pains in the extremities are described. The knee-jerks are usually exaggerated. Intelligence, even at this period, is often affected; the neurasthenic manifestations are frequent and important. Along with these symptoms the characteristic erythema appears. This pathognomonic symptom will be described later.

The second stage is marked by an aggravation of existing symptoms and the appearance of new and marked evidences of involvement of the nervous system, which now dominate the scene. Among the motor disturbances muscular weakness, partial paralysis, tonic contractions, tremors of the arms, hand and tongue, convulsive movements, and exceptionally epileptiform seizures may be noticed. The gait may be paralytic or paralytic-spastic. Among sensory disturbances paresthesias of great diversity are noted. Sensations of burning, formication, hot

and cold flashes, numbness, dragging, etc., all render the patient's existence miserable, and sometimes even end in suicide. Changes may occur in some of the organs of special sense. Vasomotor and trophic changes are also seen. Psychic disorders, usually of a depressed nature, and in some cases actual insanity, are not unusual. Among general symptoms it may be noted that fever in uncomplicated cases is slight. Disturbances of the menstrual function and other disorders of the reproductive system are not infrequent. There is usually a mild grade of anemia.

The *third stage* is really the terminal stage and is chiefly characterized by cachexia. There is an increasing marasmus which, along with the other symptoms described, finally leads to the fatal issue, death not infrequently being due to some intercurrent affection.

Pellagra in its chronic course not infrequently displays certain very acute and rapidly fatal explosions—fulminant attacks which are of the utmost gravity, and not always easy of diagnosis if the patient has not been seen before the onset of the acute condition. The most typical of these explosive incidents has been called by the unfortunate name of typhoid pellagra. And there occur other allied acute conditions. These conditions may prove extremely puzzling unless one have pellagra in mind and make careful inquiry into the history of the case and scrutinize the skin for the evidence of a past erythema.

Further it may be mentioned here that the psychic manifestations of pellagra are common and important. Besides the milder manifestations already noted it is well recognized that pellagra may be the cause of insanity. It is thought that from 8 to 10 per cent. of pellagrins develop serious mental disorder, the type of which is variable. It should always be remembered that pellagrins with mental disorder, even of a mild grade, often show suicidal tendencies.

Pellagrous Erythema.—The pathognomonic symptom of pellagra is the erythema. Largely following Merk, the characteristics of this erythema are given below.

1. Dermatologists have almost unanimously agreed, in the first place, that the pellagrous eruption is an erythema in the dermatologic sense of that word.

2. The erythema, as a rule, appears suddenly—within a short time; and its genesis is not necessarily connected with such external things as solar or atmospheric influences. Not infrequently, however, its origin can be traced to various external influences, solar influences,

applications of various irritating substances or even pressure, as, for example, on elbows and knees, which should always be examined.

3. The erythema is peculiar and characteristic in its limitation, its edge ending in a typically marked red border, delimiting it sharply from the healthy skin beyond.

4. In its evolution it rather early develops a broad zone of scaling which is quite characteristic of the process. As a rule it does not reach its height for several days, and requires even a longer time in its retrogression, which ultimately occurs by first, loss of the rose border, then gradual fading of the centre, while the scaling and crusting zone remains still longer the seat of the receding process. Exfoliation may take place with the shedding of the large areas of epidermis.

It is to be noted that some cases show bullous formation with early loss of epidermis, and consequent raw, bleeding surfaces which readily become infected. At times during the receding process ulcers and painful cracks and fissures may develop, and even gangrenous processes may be rarely seen.

5. One of the most striking characteristics of the eruption is its symmetry and distribution. It is nearly always markedly symmetrical and shows certain places of predilection. These are the backs of the hands, and of the feet, the face and the neck—these places most exposed to atmospheric influences. Many descriptive appellations have been given to the various localizations of the erythema, such as "glove," "gauntlet," "boot," "neckband," "cravat," "mask," etc. In addition to these favorite spots the eruption may exist elsewhere and may even be generalized.

6. The color scheme of the erythema is of importance. On its first appearance it is usually a fairly bright red, almost like a sunburn, and the part is a little puffy. In a short time this color often takes on a bluish tint, sometimes called "plum" color. Then, in the course of further changes, the whole passes to a reddish brown, or sepia, or bronze tint, which is very characteristic.

7. Itching is usually absent and never marked. The part burns and has a tense, uncomfortable feeling, but does not show scratch marks.

8. The seasonal appearance of the eruption is important. As a rule, it appears but once annually, at spring time or in the fall. It may occur at both seasons in the same individual, but this is unusual. It may also occur rarely in the winter months.

9. With early attacks the skin, after the disappearance of the

eruption, resumes its normal appearance, but recurrences lead finally to trophic changes.

10. Notwithstanding the importance of the skin symptoms in diagnosis, the associated constitutional manifestations should be sought for and given due weight. Cases may occur with only the skin eruption, and in some localities such cases, especially in children, are not rare.

Reference here must be made to the fact that pellagra is reported without any skin lesions, so called *pellagra sine pellagra*. It is a matter of much doubt whether a pellagra ever occurs without skin symptoms at some period of its evolution. It is no rare thing, however, to meet cases presenting the clinical features of the disease without skin manifestations. The diagnosis under such circumstances is by no means certain, and in many cases must remain tentative.

Treatment.—The treatment includes prophylaxis and the management of the developed disease.

Prophylaxis: In view of the uncertain etiology there are few definite prophylactic measures which may be recommended. Until something more definite is learned it would certainly be wiser to avoid corn and corn products, more especially since there is good reason to believe that many of the corn preparations found in the market are likely to be spoiled. This is probably more particularly true in the southern states. The Italian Government has adopted prophylactic measures based entirely on the corn theory and is claiming good results therefrom.

Management of the disease: The treatment of the disease, since there is no specific remedy, is not satisfactory and is largely symptomatic. The essential points in treatment are outlined below.

General measures: Where obtainable, good nursing will contribute largely towards success. Rest is a matter of prime importance and should never be neglected, even in mild cases. Diet is a matter of almost equal importance. It should be abundant, carefully selected, easily assimilable, and, whenever possible, should include meats. It must of course be regulated to meet the needs of the individual case, but abundance of food should be insisted upon. It should include a liberal supply of salt. The patient should be weighed regularly. Various hydrotherapeutic measures may often be used with benefit. Such treatment must, however, be used with discretion, and consideration given to the state of the patient and the result to be obtained. Change of climate, especially to colder latitudes, may be advised. Avoidance of strong direct sunlight will often prevent a bad erythema. Fresh air,

and cleanliness are of course to be enjoined. Saline solution by the bowel or intravenously may at times be of service.

Medicinal: Arsenic has long enjoyed a reputation in the treatment of pellagra. It may be advantageously used in the form of Fowler's or Donovan's solutions. Atropyl and cocaine, as well as calvarian, may be of service in selected cases. Hexamethylenamine, quinine, and thyroid preparations all have their advocates. Symptomatic remedies must be employed as needed. For insomnia some of the well-tried hypnotics; for the diarrhea bismuth preparations, guaiacol carbonate, and opium; for the anemia some bland preparation of iron; for the erythema a calamine lotion, bland ointment, or, if necessary, antiseptic dressings. Strychnine is of value in convalescence. Complications should be promptly treated with appropriate remedies.

Surgical: Under some circumstances direct transfusion of blood may prove a valuable surgical resource.

In conclusion, the mental depression so often associated with pellagra sometimes results in suicide, and this should always be kept in mind. It is not to be forgotten also that a disease so chronic in its nature and so prone to relapse demands prolonged medical supervision.

THE TRAINED TEACHER IN THE TRAINING SCHOOL*

By AMY P. MILLER, R.N.

Graduate of the Johns Hopkins Hospital Training School for Nurses; Instructor of Applied Science to Nursing, Massachusetts General Hospital Training School for Nurses.

THE arguments in favor of the trained versus the untrained teacher seem to me so self-evident as to be almost a reflection on the intelligence of the audience to which they are presented. At the same time, I know that many superintendents of training schools are not yet convinced that trained teachers who bring modern methods of teaching into the schools have any particular advantage over the old order.

Matthew Arnold has said in one of his essays, "Nothing is taught well except what is known familiarly and taught often," and again, "Once secure what is excellent to be taught, and you can hardly teach it with too much insistence. . . . But the heart-breaking thing is, that

* Read at the April meeting of the New York State League for Nursing Education.

what they (pupils) can be taught and do learn is often so ill chosen." Can this careful and almost vital choice (when one remembers the limited time at one's disposal) be expected unless teachers are allowed time to consider and weigh the relative merits and usefulness of the material at their disposal? The higher up in the scale of teaching we go, the greater the amount of time devoted to study and individual research. The teacher in a country school has many grades and devotes many hours to teaching, grinding away patiently year after year. In the high schools of some of our largest cities only college graduates are eligible as teachers, and they devote themselves to special branches, such as history, chemistry, etc., while the full university professor may give two to three hours a week to actual teaching during a part of the year. From these facts I think we may conclude that the breadth and scope and value of teaching is more or less proportionate to the time that can be devoted to the material and the details of its presentation. What can be said of teaching in other lines of work may be applied to the teaching of nurses. There can be no good reason for supposing that obsolete methods will bring better results in that field than in others.

This is an age of specialization. Efficiency is more sought after, and when found more prized, than ever before. If we would keep step with progress, we must inevitably depart from the old idea that native ability may, without loss, or development, be directed into any convenient channel. The recent psychological tests of special fitness for different types of work have already saved an enormous waste of energy by directing people toward the work that by temperament and type of mind they are best fitted to do without strain. These methods are in their infancy; what they may accomplish in the future can scarcely be estimated.

We still hear that time-honored phrase, "She is a born nurse," which formerly seemed to assume that further improvement was impossible. It was like painting the lily. But does it ever occur to any but the unenlightened now that she needs less than three years training to fit her theoretically and practically for the work for which nature has happily given her a valuable foundation in temperament and adaptability? Exactly the same may be said of nurse teachers. Some have natural aptitude, and are fortunate, for this enables them to teach with pleasure and a minimum amount of strain. So are their pupils fortunate. But that methods and knowledge may be assumed because they have them, is manifestly absurd. If a teacher then has had preparation for her work, she will have imbibed the idea that the manner of pre-

sentation is of the utmost importance. It will vary somewhat with every class of students she meets. The selection of material to present demands careful consideration and will be governed somewhat by the preparation of the students and the subsequent character of their course in the school. Unless she herself has access to and opportunity to read books concerning several phases of her subject, she will have only a very restricted field from which to gather her material.

We all realize from our own experience the value of associating certain general facts with concrete cases. How easy it is to remember the symptoms of a disease when we have not only read of them in a text-book but have actually seen them in patients under our care. If a teacher would make use of this most valuable method of making her pupils possessors of their knowledge, she must know the resources that the wards can furnish to illustrate the points she may wish to present.

Outlines carefully thought out may enable teachers to help their pupils to crystallize their thoughts, present them in orderly methodical form, and separate the important from the trivial. Test papers have the advantage not only of making the pupils go over the ground again, but of giving the teacher important information as to what has not been clearly understood, or what needs more special emphasis. This means often many hours spent in going over and correcting papers, but I have always found it productive of a much clearer understanding of the points which one must master in order to understand succeeding difficulties. Regular quizzes on lectures not only necessitate preparation on the part of the pupil, but often reveal most unexpected abnormalities in ideas. The formality of a lecture hall makes one hesitate to interrupt, and in the hurry of taking notes the questions either do not arise or are forgotten, but the lack of formality in the classroom and the opportunity for free discussion clear up much that would otherwise be obscure or distorted.

The fact then to which I would direct your attention especially in this connection is that *all this takes time*. A teacher cannot do creditable work unless she has time for the details of that work. She cannot dash wildly from a ward which she has been supervising, bury her head in a book for fifteen minutes or half an hour, and expect to give her pupils anything much worth while.

In giving our pupils good teaching, we are not only sending them out better equipped, but we are emphasizing the importance of the intellectual aspect of nursing. By placing emphasis on that phase of

the work they will carry it with them into the schools they direct, and perhaps, if we live up to a high ideal, there will be a more steady trend toward the higher standards in teaching and a more rapid departure from methods which have been abandoned by other bodies of teachers.

In the school with which I am connected one instructor does all of the practical teaching. This includes not only demonstrations but drill and practice work. When the pupils go into the wards they know, not only the procedure in detail from practice in doing it, but the reasons why they do certain things. The supervision of the work in the wards is done by assistants to the principal of the training school who, with the head nurses, attend conferences held by the instructor in practical work. This insures uniformity.

My time is devoted entirely to the teaching of theory. It embraces the instruction given to the probationer class, which covers nine hours a week for three months, and quizzes held at different hours for day and night nurses on lectures, and bedside clinics given by the medical men. These latter classes are for the junior and intermediate nurses. The senior classes are held by the superintendent of the training school. The time devoted to teaching and attendance upon lectures and clinics amounts to about twenty-one hours a week. The rest of the time, outside of a reasonable amount for recreation, is spent in preparation for classes, correction of papers, and other work in connection with the classes, which I have indicated elsewhere.

The question of getting better, more thorough preparation and fresh inspiration is always a serious consideration for teachers in training schools, but should not be abandoned on that account. Some summer courses are always available when other opportunities are out of the question. No teacher should be content to go on year after year without adding something to her store of knowledge, and contact with other students always proves stimulating and beneficial from every point of view.

Finally, I would sum up the advantages of having a trained teacher, with time to devote to the various lines of her work, by saying that she is more efficient, she turns out pupils of a higher degree of intelligence, she comes to her work fresher, with more enthusiasm, and more resources as a teacher, she is better posted, for she has more time to devote to her subject.

CAMPING FOR NURSES

By JEANNETTE GARDNER HEATH, R.N.

Graduate of Christ Hospital, Jersey City, N. J.

If you are worn out with city noises and the strenuous demands of your winter's nursing, I know of no more restful and nerve-healing vacation, than camping.

Ours is done thus: with a good, seaworthy, cruising canoe, seventeen and one-half feet long, thirty-six inches wide, carrying thirty-five feet of sail, we start in search of rest and adventure.

The outfit is packed in waterproof duffle bags. The Marquis tent with canvas floor, air bed and clothes fill up the space in one bag. Blankets, clothes, not too many, a few good magazines, which we use to light fires with after reading them, several books (preferably nature studies, travel or exploring), a pack of playing cards for rainy days, canned goods sparingly, and a camera are in a bag by themselves. Then there are tent poles, pegs, the pump for the air bed, an ax in a leather case, a folding chair and a meat broiler in a plain canvas bag. The flour, sugar, etc., are in small waterproof bags; bacon, eggs, butter, and shortening are in friction top cans; then all are put together in the food duffle bag which is smaller than the others.

The dishes are of aluminum, one packed inside the other and all in a special bag to fit them. The water bottle is of waterproof material and is lighter and more easily packed than a jug. The wash basin is of agate and tucks in most anywhere. The water pail is of waterproof material, is collapsible, and serves as a dishpan generally. Our outer clothes are waterproofed, of neutral tints, hence they show very little soil, and allow us many glimpses of birds and small animals which we otherwise would not get if attired in more decided hues.

We pack our stuff the day before, so as to get an early morning start. For, generally, the morning breezes are more gentle, and if we can sail, we naturally prefer mild winds to boisterous ones; or, wind and tide not being right for sailing, light winds are easier to paddle to.

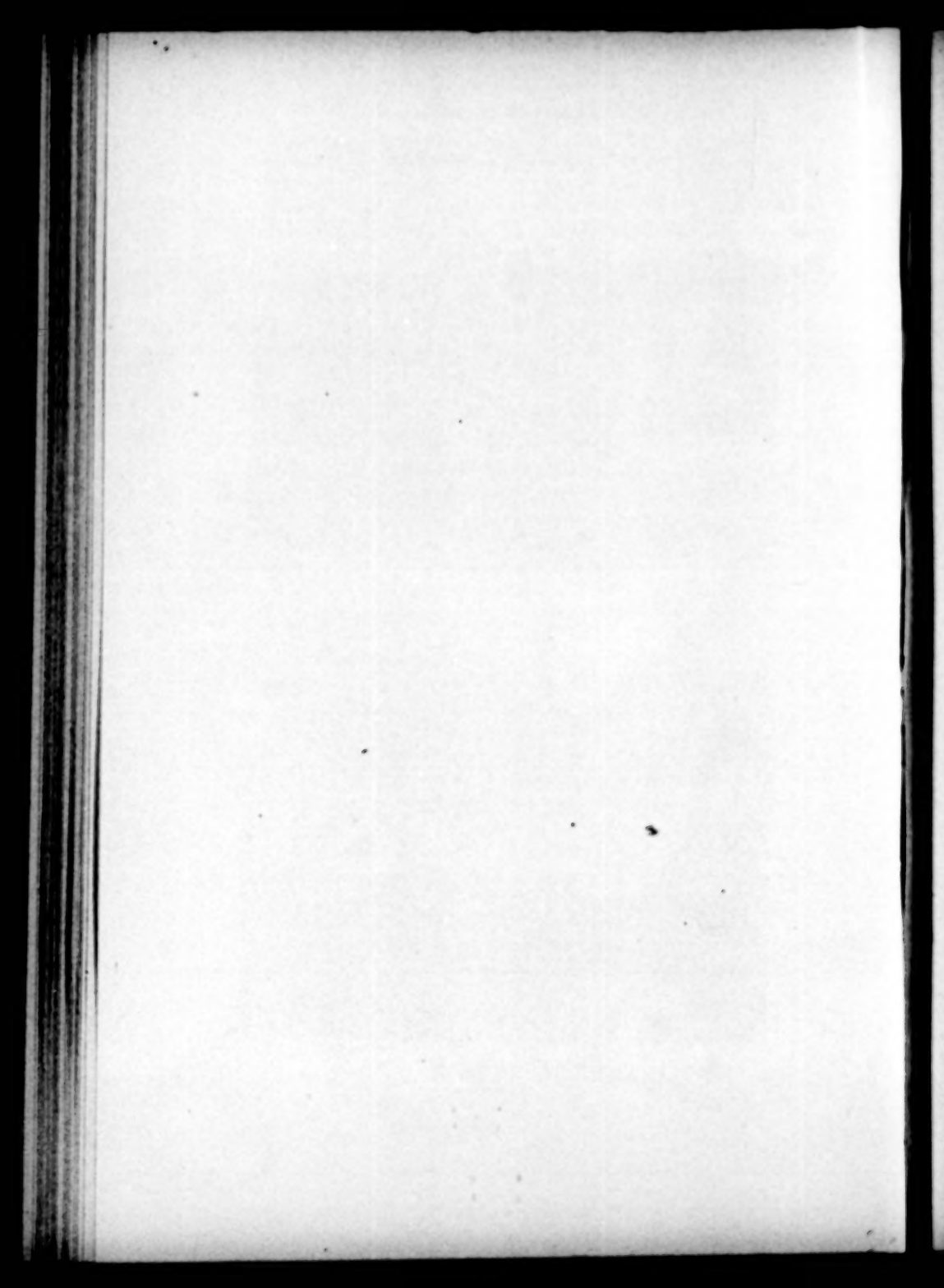
The distance of a day's journey varies, but, Indian fashion we eat little or nothing in the middle of the day on a long paddle. I take the bow, my husband the stern, to cover my mistakes. I generally kneel, Canadian-fashion, in the canoe, as I find I tire less easily and can pull a better stroke. Our trips together have been in and about the waters of Narragansett Bay. My husband has been taking trips around these



THE CAMP KITCHEN.



LOADING THE CANOE.



waters for fifteen years and has not exhausted the beautiful camping sites yet. To know the Bay and its rivers well is to love them, and needless to say they are endearing themselves to me. After a comfortable paddle, we pitch camp, and there are only a few places where the people are really hostile to genuine campers. Never mind if we haven't reached our desired goal, we can another day, and why not enjoy as many of the beauty spots as possible? While my spouse is pitching the tent, I find a little firewood and get supper started, generally an "Irish stew," and boiled rice with plenty of raisins, eaten with evaporated milk and sugar, for dessert. Coffee tops off for me, and a pipe for the "Gude-man." Sitting around the dying embers of the camp fire brings to close an ideal day.

In some places camp fires are not allowed, and for such we carry a vapor stove, which with a steam cooker is ideal. But on long trips, where we move often, we leave the steam cooker at home, as it is bulky and apt to get mishapen in packing.

One thing which it is well to remember is to pump up the air-bed before supper, as it looks like a mountain afterward.

After the fire has been extinguished by several pails of water, you crawl between the army blankets on the air-bed and are soon in the "Land of Nod," waking only when daylight sends some sweet songster to your tent poles or ropes to sing you, "Good morning and welcome." After the serenade, you take a dip in the salt or fresh water about you, with the trimmings left off your bathing suit, bloomers and waist being sufficient in most places, then after a breakfast of fruit, bacon, eggs, bread and coffee, you are ready for most anything,—a day's exploring, lounging, photographing, or pulling stakes for other quarters.

Of course there are rainy days, and insects come to bother you, but they are part of the "game." We have been on trips of two weeks without a drop of rain, and bayberry bushes make excellent brooms with which to clear the tents of bugs. Plenty of tobacco smoke discourages most of them into lifelessness at night.

Sometimes, when we feel sociably inclined, we invite another tired nurse and a pleasant male companion and make a genial party of four. In that case, it makes the duffle for each canoe lighter, as only an extra tent, blankets, beds and clothing are needed. Nearby farms and springs furnish us with water, milk, eggs, chickens, vegetables, and sometimes fruit and butter. The family nearly always like to visit the camp and have us show and explain all our contrivances.

All too soon we have to turn our faces homeward to the serious side of life.

Now as a matter of fact, all our camping places can be reached by wagon road, so if one could not get there by water, or did not care to, the outfit could be sent by wagon, but it adds zest and romance to the expedition to make believe you are far from the haunts of man.

SOME RECENT ADVANCES IN MEDICAL SCIENCES *

By JOHN A. HOLMES, M.D.

Professor of Pathology, Philadelphia Polyclinic; Instructor in Experimental Pathology, University of Pennsylvania; Pathologist to the Philadelphia Hospital for Contagious Diseases.

THE past few years have been quite fruitful in the development of problems relating especially to the cure and prevention of disease. Because of the close relationship of the medical and nursing professions, it is necessary for the latter to keep abreast of any new and practical advancements. The frequent opportunity afforded the nurse in the line of preventive medicine renders it necessary for her to have an understanding of recent progress. Through the medium of the newspaper and periodical the laity are frequently given early information regarding some discovery, and naturally they expect both physician and nurse to be able to express a careful and intelligent opinion.

At no period in the history of medicine has there been more research activity than at the present time. Splendid institutions are being erected and endowed for special work, and new knowledge is being quickly gained and advanced along practical lines for a better understanding and treatment of disease.

While many important discoveries have been made in the past few years there are two which stand out because of their important significance: vaccination against typhoid fever, and chemotherapy. The former marks a great step in the prevention of a dreaded disease and the latter opens up a new therapeutics of vast possibilities.

Antityphoid Inoculation.—The conception of prevention in typhoid fever by means of a vaccine is based upon the original experiments of Pfeiffer and Kolla, two German investigators, as early as 1896. The method, however, has been popularized by Sir Almroth Wright in England and in this country through the army, by Major Russell.

* Address delivered before the Philadelphia Club for Graduate Nurses, January 7, 1913.

Despite the fact that the bacillus causing typhoid fever was discovered many years ago and means whereby healthy persons are infected are well known, the disease still claims a heavy toll of human life each year. Sanitation has improved the condition very much, as better water and milk supplies and better care of sewage and especially disinfection of excreta of the typhoid patient have gone far toward reducing the number of persons infected, but we still have the clinically unrecognized case to deal with, persons not sick enough to go to bed but yet dangerous because of the infected excreta; also there is the danger of direct contact with one sick of typhoid, and there is always the danger of the disease being brought into our midst by a visitor from some town or locality where the disease is prevalent. All of these factors make some additional means of protection advisable and welcome. If all the excreta from every case of typhoid fever were efficiently disinfected, the disease would soon disappear, but this is not possible at the present time. Continued improvement in sanitation, with more wide-spread use of the typhoid prophylactic or vaccine, will gradually eradicate typhoid fever from our midst.

Typhoid vaccine, better termed "bacterin," is composed of typhoid bacilli suspended in salt solution and killed by heating at a certain temperature for a definite period of time. The bacterin is then standardized by counting the bacilli, and a preservative added. At present this prophylactic is placed upon the market in special syringes or ampoules, each containing the proper dose. The bacilli themselves are dead, in the sense that they cannot reproduce, but when correctly prepared are able to stimulate our own body cells to produce an antibody specific against the typhoid bacillus. In other words, as a result of injecting the bacterin, antibodies are formed which prevent the growth of typhoid bacilli should we become infected. By this process of vaccination we are prepared beforehand to resist the typhoid bacillus; our defenses are so strengthened that the invader cannot survive and we thereby escape the disease.

Vaccination against typhoid fever is somewhat analogous to vaccination against smallpox. In the latter the germ or virus is so modified by passing it through the cow that it cannot give true smallpox, but is able to stimulate body cells to produce the specific antibody to smallpox so that we escape the infection. In the case of typhoid bacterin the germ is modified by heating so that we cannot contract typhoid fever from its use, but are yet protected in the manner given above. Therefore the only really legitimate opposition to the use of typhoid bacterin

is the discomfort of administration, which is quite insignificant to the benefits derived.

The bacterin is not rubbed into an abrasion on the arm as in cow pox virus, but must be injected subcutaneously, not intramuscularly. The technic of administration, therefore, is quite simple, and consists briefly of sterilizing a patch of skin with tincture of iodine near the insertion of the left deltoid muscle and injecting the prescribed dose with a sterile syringe. Three doses, at weekly intervals, are necessary to secure the proper immunity. After administration, a dressing containing some evaporating lotion, and a bandage may be applied to control any pain. As a rule, this dressing is not necessary.

Following the administration of the first dose of bacterin there may be slight headache and discomfort and in exceptional instances a slight chill. These effects are especially noticeable in the debilitated. Persons who are hale and hearty may not experience any ill effects at all. About the site of injection a painful area of swelling and redness may develop and the neighboring lymphatic glands become large and tender, but these subside in 48 hours. Under proper precautions abscess formation is very uncommon indeed. The second and third doses are usually free from any ill effects. According to Dr. Spencer, who has administered the bacterin to a large number of nurses and other persons in the hospitals of Massachusetts, 66 per cent. of persons have slight or no unpleasant reactions; in 10 per cent. the reaction is moderate—malaise, headache and mild fever; in only 4 per cent. is the reaction of a more severe nature. It is recommended that the inoculation should not be done on the eve of catamenia or during the early days of the flow.

Until recently it was regarded by some as dangerous to administer the prophylactic to those exposed to typhoid fever for fear of producing a "negative phase" during which the person was considered for a brief time to be more susceptible, but this is probably untrue and recent work would indicate that instead of being rendered more susceptible, immunity is induced almost at once. This is well demonstrated by administering the bacterin with good results to persons in intimate contact with typhoid fever patients, as physicians, hospital nurses, and attendants.

Statistics have now accumulated which prove quite conclusively the efficacy of inoculation against typhoid fever. A few of these may be illustrative and not devoid of interest. During the Spanish-American War, 10,750 troops were mobilized in Jacksonville, Florida. Among these troops there developed 1750 cases of typhoid fever, and including

cases more doubtful the number reached 2693 with 248 deaths. In marked contrast note that last year about 20,000 men were assembled in Texas and California along the Mexican line; all of these soldiers received the typhoid prophylactic either before reaching camp or shortly after; the camp lasted about the same length of time as the Jacksonville camp in 1896; both camps were situated in about the same latitude and furnished with artesian well water—yet in contrast to the more than 2000 cases of 1896 there were but two mild cases and no deaths in 1911! It is true that the sanitary arrangements of the 1911 encampment were much better, but the men were permitted to mingle pretty freely in the neighboring towns where typhoid fever was prevalent and were exposed in this way to the same dangers as the citizens.

In twenty-three of the hospitals of Massachusetts the nurses and others intimately exposed to typhoid fever, numbering 1585 individuals, have received the prophylactic. The number of cases of typhoid fever among these was eight times less as compared to the number of cases developing among 1361 persons not inoculated.

Statistics of these in civil life are not easily obtained, but wherever the prophylactic has been given there are numerous incidences indicating the efficacy of the treatment. Many state and city boards of health are making and distributing the prophylactic free of charge and urging its administration, especially in institutions.

Antityphoid vaccination is of the greatest value in affording protection against typhoid fever for a period of at least two or three years. Its administration is especially desirable to those intimately exposed to the disease, as nurses and members of a family where the infection is present. We agree with those who consider that authorities in charge of institutions who do not urge this prophylactic are negligible in the extreme. It is certain that this method of inoculation is the only means of offering most protection and that most likely to be effective amidst unfavorable surroundings.

Chemotherapy.—This term, in a strict sense, means the treatment of disease by means of chemical agents. In this respect it is not a new therapy by any means, as chemical combinations have been used for hundreds of years in the treatment of disease. The term is understood, however, to apply more specially to treatment of disease by means of synthetical compounds or chemicals artificially built up from simpler substances and their value determined experimentally. Ever since the discovery of bacteria and the establishment of their relation to disease, it has been the hope and dream of medical men that some substances

would be found or made which would destroy germs in the body as one may destroy them in the test tube or in excreta by adding what is known as a germicide. If this could be accomplished it would then be possible to cure disease by actually destroying the germs in the diseased body. But there are great difficulties to be solved, for while it is possible to administer a substance so powerful as to kill germs in the body, yet at the same time it would kill body cells and destroy the life of the patient. Therefore it was necessary to discover or make a substance which would have a selective action on the invading organisms and leave the body cells unharmed. Professor Ehrlich of Germany has been working along these lines for many years and after trying over 600 preparations of arsenic at last perfected one which, when injected into lower animals, would completely destroy all the organisms producing their disease, without harming the body cells. This drug is popularly called "606" or salvarsan, and is now used with success the world over in the treatment of syphilis. This means a great step in a new field and blazes the way for more research and advancement.

Salvarsan is a yellowish powder and readily soluble in water. It is placed on the market in sealed ampoules and should not be opened until ready for administration, for after exposure to the air it becomes oxidized and toxic in effect. Salvarsan is usually administered intravenously after dissolving the powder in sterile saline solution made of distilled water and neutralizing the solution with sodium hydrate solution. It is apt to cause considerable pain or discomfort when injected subcutaneously or intramuscularly. Lately Ehrlich has improved his remedy so that it is very easy of administration, being dissolved in sterile saline solution and administered intravenously according to the normal technic of such injections.

After administration the patient may not experience any ill effects beyond those due to the injection of so much saline solution. In some instances there is a slight chill, congestion about the head, profuse sweating, and a moderate temperature. It is essential that the solution be properly prepared and with freshly distilled water, as some of the bad effects may be due to the water used in making up the solution.

The drug has certain contra-indications and cannot be given promiscuously.

At first it was hoped that a single dose would serve to sterilize the body and destroy the infection at once and completely. This result has been obtained in treating lower animals and has occurred likewise in some human cases of syphilis, but as a rule it is better practice to give

several smaller doses. The effect of the drug is usually startling and most effective. Primary and secondary lesions of syphilis rapidly disappear, while older lesions yield more slowly.

The discovery of salvarsan was the result of logical reasoning and much experimentation. It was not a pure accident. Therefore it opens a new and vast field. For many years physicians knew of only two specific drugs: mercury in syphilis and quinine in malaria. It was not known how they cured, but at present we know that they have a direct poisonous effect upon the parasites causing these diseases. The treatment of bacterial diseases with similar preparations will offer more difficulty, but salvarsan means such a tremendous stride in this direction that we can confidently expect more discoveries with an increasing number of specific drugs in the treatment of disease.

PATIENTS' CRITICISM OF NURSES

By A. D., R.N.

MANY nurses are criticised severely by patients and the public, sometimes justly, sometimes unjustly, not only for the lack of ability in caring for the sick, but for their character, manner, and personal appearance. We all know in nursing, as well as in other professions, there are all classes to be found, yet it does seem that women who take up nursing should help to ennoble the calling rather than disgrace it, as a great many nurses are doing throughout the United States. The hospitals from which these so-called nurses are graduated are greatly at fault, for so many inferior, uneducated women are being forced upon the public at large as graduate nurses.

Not long ago a friend called my attention to a graduate nurse who had been her cook three years previously. Do not misunderstand my meaning in regard to cooks, there are a great many refined women earning their daily bread in this way, but this one was far from being refined, for while employed by my friend, she was found to be dishonest, untruthful, a gossip, and without the rudiments of a common-school education. This girl did not like cooking and thought she would take up something easier, and some hospital graduated her as a nurse. Did that hospital look into her past history? Were its educational requirements up to the standard? If so, why was this pupil accepted and graduated? Not until all hospitals are required to be registered, and state registration for nurses made compulsory, will such inferior nurses be debarred from imposing on the public.

A patient is gently surprised, after her nurse has left, if she finds she was not a graduate, as she had been engaged as such, and received \$25 a week for her services. Such a nurse considers that she is entitled to the same amount as the graduate, as she had only a few weeks more in training when she left the school. Again, the nurse who has been expelled from some training school, or one who has not been found worthy of a diploma, goes into private homes and hospital work and receives the same amount as the graduate.

A practical nurse was called in as a third nurse on a case. At the end of the first week she was asked her charges, and she replied, "\$25." She was on duty the same number of hours as the two trained nurses, and did not see why she was not entitled to the same amount. Had she trained two or three years to assume and meet the responsibilities that come to the trained nurse? Is it possible that the patient and public will not criticize when these things are tolerated?

The manner in which some nurses dress and conduct themselves in the sick room is far from being proper. Sick people feel that elaborate coiffures (which take some little time to arrange), high-heeled shoes, silk stockings, perfumes, rouge, tight skirts, collarless low cut waists, elaborate night gowns, and silk kimonoes all help to detract the nurse's interest from the patient. It is quite as bad form for the nurse to wear soiled uniforms, or a stiffly starched rustling one. There is a happy medium in this as well as other things. It is the duty of every nurse to dress and look as well as possible, but she should dress in keeping with her position, not only in the sick room, but elsewhere.

Not long ago, at a fashionable summer hotel, my attention was drawn to two refined looking young women, with an invalid. I learned later they were both graduate nurses, simply dressed in pink, white, or blue linen, without caps. The patient did not require much nursing, and these sensible women did not try to attract public attention to their patient and themselves by posing in uniform in the dining-room or elsewhere. On the other hand, there were seven nurses in the public dining-room, in uniform. If these young women had left their caps in the sick room (as a public dining-room is no place for them), few would have known they were nurses with convalescent patients, especially the transients.

Imagine yourself a patient, having your nurse sit with her feet crossed and resting on the edge of your bed, or, having had her dinner, sit beside you using a toothpick; your telephone ringing several times a day, and your nurse carrying on long and loud conversations within

your hearing; trying to entertain you and your family with the experiences in the hospital, and other patients' homes; or having her go out for time off duty, neglecting to leave some one in charge of your medicines, coming back in three or three and a half hours when she is supposed to have had two hours off duty.

In sickness the nurse is brought so close to the patient, and of necessity so much of the family affairs are brought to her attention confidentially, that she should realize this, and try in every way to prove herself worthy of the confidence reposed in her. If nurses would do this, there would be less cause for criticism.

The incident was brought to my attention of a patient who had a serious operation performed, and after a recovery of a few months, went for a visit with friends in a town some distance from her home. While there she spoke of her illness, and happened to mention the name of her nurse. Immediately, the friend calling recognized the name, and said, "Oh, yes, she nursed a friend of mine, and told us about your operation. I am so sorry to hear you had a cancer. How small the world is! I never dreamed I would meet you." The doctor and family had kept the nature of the operation from the patient. The shock she received when the truth was revealed to her so cruelly caused a nervous breakdown, which proves that gossiping nurses are a menace to the profession.

Sickness always brings an added expense. Many nurses are justly criticized for their extravagance in ordering prescriptions renewed, or expensive drug supplies, which they do not necessarily need. With a little ingenuity home supplies can be utilized just as well. They are also criticized for using gas and electricity when it could be dispensed with.

Again, the nurse who goes into the home assuming authority, not only over the patient but family and servants, will surely be criticized, while the nurse who maintains a feeling of harmony with the household is the one who will be called when a nurse's services are required again.

A nurse's home as well as hospital training is more plainly shown in the sick room than in any other place. When our hospitals realize this more fully, and demand better preparation for the training school, then will the nurses sent into our homes be better qualified in every way to meet the professional and social demands that may be laid upon them.

PROSPECTIVE RED CROSS RURAL NURSING IN THE KENTUCKY MOUNTAINS

By FANNIE F. CLEMENT

Nurses who read the article by Dr. J. A. Stucky in the *Public Health Nurse Quarterly* of January, 1913, entitled "Another Field of Usefulness for the Graduate Nurse," must have realized that here in the Kentucky mountains is a field for public health workers such as would be difficult to find in any other section of the country outside our southern highlands.

Those unfamiliar with these far-away people may readily think that they are probably well contented, not wishing to be disturbed in their mode of living. Even when the truth about them is known it is hard to realize that in this beautiful sunny country, where cubic air space is not measured by inches and so much apportioned per family, that health conditions could approach and in some respects even exceed what we might find in the worst city districts. The people, to be sure, are heroic in their endurance of physical suffering, but they do not know what it means to be free from it and they are pre-destinarians. They have not learned the causes of their ills and that many of them may be prevented.

A visit to this country has all the novelty and charm of a foreign land to one unacquainted with mountain life. Leaving the railroad where city clothes are discarded for the kind which may be easily carried in a saddle-pocket, one may readily become close friends with the horse or mule which is to carry him over mountains and along valleys, over roads which beggar description. That any animal can manage four feet as these Kentucky horses do is marvelous. Travel for miles and miles may be in creek-beds of rock and fallen branches or in bridle paths over hills in some places too steep for riding. Then comes a smooth bit of road leading to a ford as there are no bridges. After heavy rains the larger streams are at times impassable, locking in the inhabitants for days at a time.

Stop at one of the cabins and ask to be directed to your destination and the answer will sound something like this, according to the names of creeks: go up "Crane," over "Shoulder-blade," down "Chicken Skin," across "Troublesome," up "Squabble," over "Heap-for Larry Hill" to "Beaster-bill." A certain church for which you might inquire is actually situated half way between "Kingdom-Come" and "Hell-for-artin."



A "DOUBLE BARREL" LOG CABIN. THE NURSE ABOUT TO MAKE HER VISIT.



ROAD OF SHALE, MADISON COUNTY, KENTUCKY.



**A FERRY ACROSS A BRANCH OF THE KENTUCKY RIVER,
PERRY COUNTY, KENTUCKY.**



FORDING A BRANCH OF THE KENTUCKY RIVER.

Isolated cabins seems to be scattered all through the mountains, the nearest neighbors oftentimes living several miles away. These cabins are usually built in the valleys and the settlements also are located in the lowlands enclosed by rough and steep hillsides. Precipitous slopes constitute the farm lands of many mountaineers. Small wonder that one had been a "lame lame" ever since he fell out of his corn field. No matter how isolated the one or two-room cabin may be there always seems to be a well-trodden path leading to it through the woods. The mountain people are great walkers and in attending the annual and semi-annual clinics that are held in several mountain sections by doctors from Lexington, Kentucky, men, women and children walk from 10 to 25 and sometimes 45 miles. One elderly man suffering from trachoma for many years walked 70 miles to see the doctor, but arrived too late for the clinic.

A number of denominational schools located some distances apart among the mountains have accomplished most noteworthy results. They are in charge of remarkable men and women who have devoted their lives to these people who are cut off from the many avenues of education so plentiful in other parts of this country. In each school community is assembled a group of sincere teachers an increasing number of whom are native men and women endeavoring to bring within reach of the mountain boys and girls the knowledge that stimulates ambition and a desire for better living conditions. Agriculture seems to be the chief occupation in the mountains and more and more the introduction of agricultural experts as teachers in the schools is being emphasized.

Illiteracy is very common, but like parents everywhere many are anxious for their children to receive the education they did not have. The forty-five dollars required for one year's schooling is often obtained through great sacrifices by the family. Public schools do not as yet meet the educational needs.

Money is very scarce among the mountain people, and produce or labor is often used as a medium for exchange. A little money and a few eggs may pay the doctor's bill. Students in the denominational schools work for their living expenses. When clothing is sent down by the churches, in many instances the recipients pay something for what they receive. One community has what is known as the "Trade House," where such articles as come in "barrals" are on sale certain days during the week and the women have opportunity to sew and thus pay for what they wish to purchase. Perhaps one is led to question

how these people are going to pay for the services of a visiting nurse. Let this be answered by a mountaineer himself who said "His nurses we uns want mos'. We uns are po' folks but a whole heap more of us can pay for a nurse than mos' folks thinks."

A small hospital has been established in connection with several of the schools in charge of a nurse who usually does visiting in the homes as well as caring for the students in the school. These nurses are a splendid type of womanhood, working with the most unselfish interest for the welfare of the people among whom they live. They are called upon in all sorts of troubles and their experiences are of an endless variety.

There is so much for the nurse to do that she would feel absolutely hopeless were it not for the fact that as already so many agencies are at work in this region she need not work single-handed. Sanitary engineers are trying to install properly constructed privies and to make provision for pure drinking water; a tuberculosis commission is combating this disease which here in the Kentucky mountains in 1913 had a higher mortality rate than in any other section of the United States. Physicians and government experts are allied against trachoma and are studying the possibilities of getting medical and surgical treatment to the mountaineers. A member of the United States Public Health Service has recently suggested the use of a hospital train to run through counties not already supplied with hospital facilities. The Rockefeller Sanitary Commission is working on the eradication of hook-worm and typhoid fever in the southern states. The Russell Sage Foundation has a Southern Highland Department interested in getting every possible large organization concerned with public welfare to include these mountains in their field of activity.

A situation worthy of consideration is that of the child in the Kentucky mountains deprived of one or both parents. It is hard to find a suitable home where orphans may be placed as the existence of such large families living on small means precludes the idea of an added responsibility and expense. It is almost impossible for a mother left alone to maintain her family even though she works in the field and utilizes every possibility of earning a sufficient income. Several of the mountain communities are considering the establishment of orphanages, but it would almost seem as though there must be other solutions to this problem. What nurses may do to prevent the increase of orphans covers a large area of their field for usefulness but the

welfare of those for whom such measures come too late should receive serious consideration.

The mountain doctor realizes the need and usefulness of the visiting nurse when he has learned her purpose. In one county-seat visited where there are six doctors there is not a single nurse. Only those in this community who can afford to send down the mountain to the cities ever receive the care of a graduate nurse. Good doctors also are scarce, woefully inadequate to the need. Mothers during childbirth are at the mercy of midwives. In one community of 150 persons, 6 mothers died this spring in four weeks of puerperal sepsis. The rural nurse may do much to discourage the employment of midwives, but she needs good physicians under whose care the welfare of these women may be assured.

The mountain nurse travels chiefly by mule or horseback. Native mountain women still ride side-saddle and are but gradually ceasing to hold up their hands in horror at the women who ride astride. The custom of riding "double" is common in the mountains, a wife seated behind "her man." If a nurse is called out at night she may be expected to ride "double" to get to her patient. If "Uncle Billy has a chillin' and a painin' roun' his heart" and the doctor is away the nurse must come at once.

One very common complaint is a "risin'." It may be in the throat or on the heel. In the language of one small boy whose father was afflicted with a carbuncle: "A cowbuckler is the festerinest risin' yeou could have."

Mountain conditions are so different in every way from what one is accustomed to find in other parts of this country that it is necessary to live in this region some time to be able to know the people and understand their philosophy of life. Farming implements must be made and adjusted to mountain farms, methods of agriculture to the climate and education suited to local needs. For this reason rural nurses that the Red Cross purposes to locate in the mountains will be given opportunities for preliminary experience going about with a nurse who already knows well the mountain ways of living.

The possibilities of turning the cabin into a desirable home with sanitary surroundings is not an idle thought and the Red Cross rural nurse living perhaps in her own model cabin will be able with the help of other interested agencies of whose co-operation she may be certain to bring about a better state of living conditions in this land of sun-bonnets and homespun.

NURSING IN MISSION STATIONS

CHINA, THE LAND OF OPPORTUNITY

By HELEN SCOTT HAY, R.N.

Late Superintendent of the Illinois Training School for Nurses

(Continued from page 696)

Two institutions that we visited may be mentioned in this connection: orphanages, one maintained by a municipality, one, by private subscription. They are both regarded as novel experiments in China, and the purpose in each case is most commendable, namely, saving the girl babies, and discouraging infanticide, a crime shockingly common in that country. But the horror of these orphanages will not soon be forgotten. Such mouldy, musty, dark rooms, such rags and dirt, such frowny and incompetent old women the sole caretakers of these poor scraps of humanity, spared to a fate little less cruel than death itself! What a work was there for some devoted woman in the saving of China's unwelcome girl babies, and putting about them something of the mother-love and care that are every baby's birthright! Surely, looking over the situation in China thoughtfully, every nurse zealous for the good works of her profession must thrill at the prospect of what well-organized nursing service might accomplish in this vast, unexplored field, where every city in the country offers such unusual opportunities: visiting and school nurses, nurses who are specialists in infant welfare, and tuberculosis, and in all the problems of the poor that count for health and respectability and comfort. Teaching the people better things has been begun in the schools of the missionaries, and one visible evidence always of the heaven of Christianity is the greater cleanliness and better mode of living. These Chinese boys and girls, this young blood of China so quick and eager, will shortly be, each of them, a centre of good example and influence. If such good influences could only be supplemented and enforced by the practical work of the nurse in the field, what transformations might not one confidently look for?

A third question: Does China desire such assistance? If you put the question to the people who most need help, no doubt you will get as prompt and emphatic a refusal as the visiting nurse frequently encounters in the wholly new field. And in the Old China there would

have been no other answer. But in China, the New Republic, anxious to shake off the old traditions and to get away from the old order of things, there is a new spirit that is significant and auspicious. No more China the Empire with its superstitious and hide bound customs that paralyzed all independent action, and hindered every good cause, but China the Republic, that whatever her present strength and stability, is reaching out for better things, and for the first time is recognizing that prominent among the problems one must undertake for her respect abroad and her own preservation are those relating to the public health and welfare. Furthermore, in the solution of these problems, and the planning and organization incident thereto, does any one doubt but that China will turn to our country for assistance, as she does in others of her difficulties, knowing we are truly her friends? May we not fall her now, in this great necessity!

In a town of 150,000 inhabitants, on the Yangtze River, we were recently privileged to attend a meeting quite out of the ordinary in China, the immediate purpose of which was the amalgamation of several anti-revolutionary societies into one large union, whose aim should be the loyal support of the New Republic, and all relating to the public welfare. The meeting was representative of the city's best and included besides various high officials, many business men, scholars, and teachers. Naturally, some of the old régime, still in the clutches of century-old traditions, were conservative. But it was with an unheard-of freedom of speech (for China), a courage and liberty born with the Republic, that these new problems of making China better were discussed and emphasized; the necessity of the people actually doing that which would make their government and people better in every way than the old China had ever thought or cared to be. They spoke without reserve of China's dirt and smells, of her hordes of beggars, of her uncared-for indigent and helpless and sick, of her unsanitary houses and streets, and of her bad roads. And they urged the necessity of "doing it now." Could one realizing somewhat of China's needs for its poor and helpless have heard only the speech of the president, a masterly presentation of the country's conditions and necessities, she must have felt at once that with but one such champion at her back she could confidently go forth to cope with all the powers of disease and darkness. And certainly hearing the speeches of that one meeting she must feel that China wants to be made better, and needs but to see the first small fruit of endeavor to insure to the worker, thenceforth, the most hearty appreciation, co-operation, and support.

Another feature most encouraging to the work of the nurse in China

is China's attitude to women—the recognition by the strong men of the country that in the making of the New China the women and their work are needed. Hence a woman prominent in the suffrage movement in China, Miss Song, was given place in the Republic's first birthday anniversary program, at Wuchang, city of its birth. Another Chinese woman, Dr. Mary Stone, was a speaker at the National Red Cross meeting, in Shanghai, recently, and was most vigorously applauded in all she said concerning China's need of the woman in this, as in others of the country's interests. Two women, one Chinese, one American, were asked to speak at the "village improvement" society, previously referred to. And China will gratefully give you women who are workers for the public good a field for your helpful endeavors as vast as you desire and are able to develop.

To the help of this great and needy people what a pity indeed if there are few or none to respond. As the opportunities are beyond estimation so also will be the reward! May not the next decade produce from among our numbers a goodly company of women, strong in works and in character, who shall have in the making of the New China a glorious and incontestable part!

One word as to the spiritual qualifications, since this aspect of the case has been more or less under discussion. Preacher and evangelist the nurse need not be, but she certainly needs for this great work a Christian faith that will carry her through the darkest of difficulties, a Christian grace that is always conspicuous and that always attracts to the Christ whose influence in the lives and thought of these darkly heathen folk is, after all, far more to be desired than the mere relieving of their physical necessities.

NOTE.—"At the meeting of the China Medical Missionary Association which was held in January, in Peking, a committee was appointed to co-operate with the nurses' association just organized, and there was a very general opinion that every hospital should have a foreign-trained nurse in charge."—Extract from a letter written to Miss Hay by Dr. Johnson, vice-president of China Medical Missionary Association.

FOREIGN DEPARTMENT

IN CHARGE OF

LAVINIA L. DOCK, R.N.

THE INTERNATIONAL MEETING IN CALIFORNIA

It is none too soon to begin plans for the gathering of nursing societies in California in 1915, and already the members of the International Council in foreign countries are laying plans for the coming triennial. Preliminary figures as to cost and as to itineraries have been given out. The great expense will inevitably prevent many European nurses from coming. Four hundred dollars at the very least will be needed, and it would be safer to have five hundred.

Arrangements for the International delegations' trip will be made by Mr. Frank, of the Frank Tourist Co., who is brother to Miss Frank of the Henry Street Settlement. He says we should have at least our own cars, perhaps our own train, or trains, in which way we travel less expensively and more pleasantly. The California nurses have appointed an Arrangements Committee whose chairman is Dr. (and nurse) Helen P. Criswell, of Los Gatos, and Dr. Criswell hopes there may be a Nurses' Building. Under the general regulations of the Fair Grounds, however, we could not lodge or give meals to nurses in such a building. It could only serve for gatherings. As our meetings will have very large audiences, it will probably be best to hold the general assemblies in halls, as we could not build on a large enough scale to fit our international gatherings.

Then there is the question of a nursing exhibit.

In Cologne the nursing exhibit filled a large public school; in London, a large part of a big public hall. Will our American Congress grow equally? These were the questions brought before the general committees of the affiliated societies of American nurses at their national meetings in June; but which we cannot report this month, as they took place too late for our printer to wait for them.

Our international exhibits have been chiefly of the country, where our meetings were, because the cost of transportation makes it too formidable a problem for nurses, with their slender funds, to pack and place exhibits in a foreign land. And as this will be true in greater degree

for this country, it is probable that our exhibit must be largely of American nursing. But with our Red Cross work, public health nursing, Teachers' College work and all our splendid state registration activities, to say nothing of training school, preliminary and post-graduate courses, and the regular nursing fields and lines of organization work, Army and Navy and rural nursing, social service and training for the same—we have materials for a very good exhibit.

ITEMS

VENETIOUS as our own American quack and pretended nursing machines are, it is even more distressing to see the official neglect and disregard in England that is exhibited by the highest British officers of government, toward English nurses, that splendid body of women upon whose faithful services vast bodies of English citizens are absolutely dependent. The most useful, the most indispensable class of skilled ministrants,—it is simply revolting to see a man like Asquith, with his known contempt for women, receive them with the veneer of outward politeness, and to hear him say that hospital management is "a domestic matter"! As the *British Journal of Nursing* aptly points out, there are legal protections for domestic servants which probationers are not allowed to enjoy, and if hospital training is a domestic matter the legal safeguards for servants against injustice should be demanded by pupil nurses.

THE National Council of Trained Nurses of Great Britain and Ireland has just had a most successful conference in Dublin. A beautiful Nursing Pageant was given, with tableaux representing the great women of historic fame.

DEPARTMENT OF VISITING NURSING AND SOCIAL WELFARE

IN CHARGE OF

EDNA L. FOLEY, R.N.

(To keep this department up-to-date and helpfully interesting, nurses in social work of every description and superintendents of district nursing associations are asked to put the address of its editor—104 South Michigan Avenue, Chicago—on their mailing files for items, clippings, and annual reports.)

NEW YORK.—Opportunities for practical training in public health nursing have never been sufficient to meet the demand. The time seems to have passed when a woman can hope to successfully enter this field without some special preparation, and many of our readers will be interested in the announcement of the Henry Street Settlement which offers a three months' course in public health nursing. A small salary is paid, but living expenses are not provided.

Nurses coming for this course are taken on the first of October, January, and April. Each is assigned to one of the regular Settlement districts, for which she becomes directly responsible. She is expected to assume the nursing of the patients in her district with the same care and enthusiasm that would be shown if she were to remain permanently. In her district or field work she is under the careful guidance and instruction of her head nurse and supervisor. Nurses accepted for this short course must agree to remain through the three months, unless physically incapacitated. Class instruction is given once a week. A talk upon a given subject on one week is followed on the next by a visit of inspection to some institution, the visit being intended to illustrate the talk. During July, August, and September there is no regular class instruction, but each week a trip is planned to some point of interest. This is often one of the Frank Air institutions, with which New York is so abundantly supplied. Detailed information may be obtained from Miss Jane E. Hitchcock, R.N., 265 Henry Street, New York City.

The fourth annual report of the Jamestown Visiting Nurse Association has recently been issued in book form. This is the association that originated the "Red Letter Day" for collecting funds for its work, and the last day was a very successful one, over \$1700 being received. A second nurse has been necessary, and Myra Rogers entered the work in

January to help Selma E. Lincoln, who has been the Jamestown visiting nurse for four years. In her all too brief report Miss Lincoln mentions the dental work and co-operation of local dentists. This work is not yet sufficiently emphasized by all public health nursing associations, but the day is dawning when neglected teeth will share the edium now spent wholly on tonsils, and we will realize how useless it is to buy medicines or plan long-continued treatment for "chronic" patients whose teeth are not in good condition. Once the teeth are properly attended to, many patients may be discharged to their own devices—"cured." The Jamestown Visiting Nurse Association has become a corporate member of the National Association for Public Health Nursing.

COLORADO.—The University of Colorado is offering a two years' course in preparation for social service and also a preparatory course for nurses, which is indorsed by the State Board of Registration. Pupils who take this course will not be required to serve so long a period in the hospital.

PENNSYLVANIA.—Another growing visiting nurse association that has successfully tried to raise funds for the work by a "Red Letter Day" is the Lillian Light Memorial Association of Lebanon. In its first published annual report, which covers the work of twenty months, special mention is made by the president of the good work of the visiting nurse, Anna L. McCoy, R.N.

*Indel
n-9*
The H. C. Frick Coke Company is employing nurses to work among the miners and their families in the Fayette and Westmoreland fields. Two nurses have already started the work in Heals No. 1 and Lambert plants, and others will soon be appointed. Prevention and education is the keynote of their work, which lies largely among the foreign born.

UTAH.—Two school nurses, Ellen Leas and Carrie Roberts, have been appointed to work in connection with the Board of Health physicians in the public schools of Salt Lake City. Elizabeth Shellabarger, formerly chief nurse of the Denver Visiting Nurse Association staff, has accepted the superintendency of St. Mark's Hospital Training School for Nurses.

MICHIGAN.—The first annual report of the visiting nurse for St. Joseph, Henrietta M. Schoenbeck, R.N., proves the interest of the citizens in the work, for the town now feels that it can never again get along without a nurse. Although the town is scattered and has but one street car line, 1224 calls were made to 110 patients.

ILLINOIS (Chicago).—The baby tents of the Elizabeth McCormick Memorial Fund will again be under the supervision of the Visiting Nurse Association, Mrs. M. Pearl Ringland being tent supervisor. Alma Atzel, of the visiting nurse staff, has been granted leave of absence for the

summer, and is roughing it on her claim in Three Forks, Montana. Any tired nurse, who likes country life and co-operative housekeeping on a Montana ranch, is invited to correspond with Miss Atzel at Three Forks.

WISCONSIN.—The Green Bay Visiting Nurse Association recently realized nearly \$800 from two benefit performances of the musical play "The Isle of Years Ago." An interesting feature of the programme distributed on both evenings was that two columns in the advertising section were devoted to a brief history of the Visiting Nurse Association, and a whole page article (the space being paid for by friends) explained the routine and the work of the Open Air School for pre-tuberculous children. The school was opened in April, 1912, and for seven months was supported jointly by the Woman's Club and the Board of Education. The visiting nurse called at the school weekly to weigh the children, and visited their homes to instruct their parents. After this trial, the Board of Education, by a unanimous vote, established the Green Bay Open Air School as a permanent department of the public school system. Myra Kimball, R.N., is the visiting nurse.

NOTES FROM THE MEDICAL PRESS

IN CHARGE OF

ELIZABETH ROBINSON SCOVIL

WAR ON CANCER.—*The Medical Record* reports that steps have been taken in New York to form a national anti-cancer association. The leading purpose is the education of the public to recognize the early symptoms of the disease, when cure is most probable, avoiding the fatal mistake of deferring treatment.

THE FIRST OVARECTOMY.—*The Johns Hopkins Bulletin* publishes a portrait and sketch of the life of Dr. Ephraim McDowell, who in December, 1809, performed upon Jane Todd Crawford the first ovariectomy. Her heroism in submitting to the operation, without an anæsthetic, was equal to Dr. McDowell's courage in undertaking it, and should ensure her a place in history among the heroines of the world. She rode sixty miles on horseback to reach the doctor, resting the tumor on the horn of her saddle. She survived the operation 33 years. The lives of countless thousands of women have been saved and untold suffering relieved by means of the surgical procedure whose possibility was thus demonstrated.

PLASTER BANDAGES.—*The American Journal of Surgery* advises when applying plaster of Paris to immerse the bandage, standing on end, in a basin of water deep enough to cover, putting in one at a time as needed. In lifting out cover each end with the fingers to prevent loss of plaster. Squeeze gently and pull off the wrappings. When a plaster cast is applied, if the extremities of the stocking or flannel bandage put next the skin are turned down over the cast and a few turns of the plaster bandage made over them near but not at the edge of the cast, a comfortable cuff or border is provided.

CARE OF CLINICAL THERMOMETER.—In a letter to the *Journal of the American Medical Association*, Dr. W. H. Wells suggests keeping a piece of cotton saturated with pure carbolic acid in the thermometer case as a preventive of infection.

RADIUM IN SURGERY.—In the same journal Dr. Howard A. Kelly, of Baltimore, says that radium is destined to produce a change in surgical and medical work not less marked than that of the Röntgen ray. It cures many forms of cancer, especially in the early stages, skin cancer, recurrent uterine cancer, and some cases of rectal cancer; it acts favorably on parotid growths, cures some cancers of lip, tongue, and breast,

and is potent in sarcoma. Angiomas, even the large vascular growths, which cannot be treated surgically, are cured by it. In gynecology it checks the growth of fibroid tumors, stops uterine hemorrhage, and relieves some forms of pelvic inflammation. It is especially useful in obstinate pruritus of the vulva and anus, and promises to be of definite value in ophthalmic goitre.

TYPHOID FEVER.—Dr. O. H. Brown, in a review of recent articles on typhoid in the *Interstate Medical Journal*, advocates the continuous cold air bath instead of the periodic cold water bath in the treatment of typhoid fever. The dissipation of heat following immersion in cold water is at best of short duration. Instead, he recommends the gradual withdrawal of bed covering, which holds the heat, until the body is very lightly covered. If cool air circulates through the room, even in winter, a constant withdrawal of heat is kept up with no shock to the patient nor fatigue from being moved. If a bath must be given to reduce temperature, the ideal one is a sponge bath, warm at first, gradually cooled, with friction with turkish towels to dilate the surface blood-vessels. The diet in typhoid should consist of a small amount of protein, a small amount of fat, and a large amount of carbohydrate. Milk and albumen water, cream and lactose are the preferable forms of the three classes of food. A pound of lactose (sugar of milk) may be given in twenty-four hours.

HOSPITAL PROPHYLAXIS.—Dr. L. D. Froese, writing in the *New York Medical Journal*, urges the maintenance of the highest ideals in hospital work. The giving of medicines should be most carefully safeguarded to avoid mistakes. Window and door screens should be in place early. There should be instant destruction of any flies accidentally admitted. Garbage and material upon which germs breed should not be allowed to remain exposed. Every one connected with the hospital should be taught how to prevent and extinguish fires. Care should be taken to use hospital supplies economically, such as anæsthetics, dressings, etc., and every precaution should be exercised against accidents and hospital epidemics.

THE USE AND ABUSE OF SUGAR IN THE DIET OF CHILDREN.—The *Medical Record* reports a paper, by Dr. Elias H. Bartley, and a discussion on this subject. Sugars are valuable because they yield heat and energy with small tax on the organs of digestion and assimilation. Taken in excess they are harmful, causing rheumatism, urticaria, respiratory affections, and symptoms that might be mistaken for those of tuberculosis. They also have remote effects on the nervous system and the mucous membrane. Extraordinary nervousness, bilious attacks, headaches, and manias have been cured by cutting down sugar.

FEEDING INFANTS WITH UNBLUTED COW'S MILK.—Dr. William B. Hambridge advocates the feeding of babies with whole milk and feeding them only when hungry. This is nature's method. Experiments had convinced him that from $1\frac{1}{2}$ to $2\frac{1}{4}$ ounces of whole milk for each pound of body weight gave sufficient nourishment for twenty-four hours.

TRANSPLANTATION OF ORGANS.—*The Maryland Medical Journal* says that Dr. Alexis Carrel, of the Rockefeller Institute, is of opinion that the organs and tissues of healthy persons who meet with sudden death should be preserved for future use. Such material may be kept for days or weeks under proper conditions, and then used for sufferers who need it. Persons suffering from the loss of bones, or from bone lesions, have had the healthy bones of animals or human beings incorporated to take the place of those whose function had been destroyed. Arteries have been united, organs and tissues transplanted, and wonderful results obtained in plastic surgery.

SUGAR IN DURESS OF THE HEART.—Dr. S. G. Dwyer reports in the *Lancet* the case of a patient 77 years old, cyanosed, with irregular, feeble, rapid pulse and paroxysmal breathing. The patient seemed to be dying but revived after the administration of lumps of white sugar given in milk. Four ounces of sugar were given during the night; there was manifest improvement and the same quantity was given in the next twelve hours. Smaller quantities were given for some weeks, and the patient gained slowly but steadily.

PRESERVATION OF ANATOMIC PREPARATIONS IN STRONG SUGAR SOLUTIONS.—*The Journal of the American Medical Association*, quoting from a German contemporary, reports that the preservation of specimens in a thick solution of sugar, such as fruit is preserved in, has been found simple, inexpensive, convenient, and satisfactory. The color is retained and the tissues do not become stiff and brittle, but cut with ease for microscopical examination. The specimens were kept from six to twelve hours in formaldehyde solution, then twelve to twenty-four hours in 80 per cent. alcohol, before being transferred to the sugar solution. Enough water was added to ordinary best sugar to dissolve most of it, leaving a little at the bottom of the jar undissolved.

SUGAR IN UNCONTROLLABLE VOMITING IN INFANTS.—The same journal in a synopsis of a paper in a French medical journal states that much sweetened condensed or ordinary milk has a prompt sedative action in the inveterate vomiting of young infants. The milk is heated and about 10 per cent. of sugar added, to make it about as sweet as condensed milk. The result under this treatment is entirely unlike that of ordinary raw milk, more closely resembling human milk. There is some chemical action on the albuminoids of the milk from the sugar conjoined with heat.

LETTERS TO THE EDITOR



(The Editor is not responsible for opinions expressed in this Department.)

PRESERVATION OF RUBBER GOODS

DEAR EDITOR: I have read of preserving rubber goods, such as catheters, gloves, etc., by packing in some solution, but I cannot recall what, nor can I find the article. Can any one inform me?
Minnesota. A. A.

JOURNALS WANTED

DEAR EDITOR: I am anxious to secure a copy of the JOURNAL for March, 1912, to complete a file.
KATHERINE SULLIVAN.

612 St. Clair Avenue, Cleveland, O.

(Any one having this number of the JOURNAL to spare should communicate with Miss Sullivan before sending it.—Ed.)

JOURNALS ON HAND

DEAR EDITOR: I have the following numbers of the JOURNAL, all in good condition, and should like to sell them: volume x, 6-12, inclusive; vol. xi, complete; vol. xii, 10, 11, and two copies of 12; vol. xiii, two copies of 1.

Lake Morey, Fairlee, Vt.

JULIA P. SMITH.

CARE AND FEEDING OF BABIES

DEAR EDITOR: The article on "Care and Feeding of Babies" by Marion Ballou Chalmers in the March Journal is wonderfully helpful, and to me is brimming with common-sense. Though a graduate of a well-known training school, my obstetrical work was almost altogether theoretical. I won the prize in my examinations, but my real experience was limited to one case. So, in a way, I have had to "work out my own salvation" on private duty. I too have had to study nature and follow its teachings. When a child cries, be it infant or not, I must investigate the cause and remove it if possible, and not leave the hapless babe of humanity to "cry it out." The mothering and coddling which are a baby's birthright do not spoil it. "The greatest of these is love."

KENTUCKY.

WIDER INFORMATION NEEDED OF STATE BOARD REQUIREMENTS

DEAR EDITOR: I wish to enter a plea for all the applicants who will enter training schools for nurses in the future, warning them in some way that unless they enter a training school which is recognized by the state board of examiners they will not be allowed to practice in some states as graduate nurses. I know that a great many nurses in the small hospitals do not know about state registra-

tion, and if they had heard of it, they do not realize the full importance of it. If they did, in due time the small hospitals would be compelled to either comply with the state laws or close the training school for want of pupil nurses, which would be only right, since they do not choose to consider their pupil nurses' future welfare. May I suggest that one way to accomplish this, would be for each state association to publish a notice in all the weekly and daily papers giving the names of the hospitals that are recognized by the state board, and stating what state registration means to nurses. I should be glad to hear the opinions of other nurses on this subject through the JOURNAL.

"M. B."

Iowa.

HOW MOTHER'S MILK MAY BE INCREASED

DEAR EDITOR: I always read with interest anything pertaining to the welfare of babies. In a late issue of the *AMERICAN JOURNAL OF NURSING* an interesting writer says: "If every mother could be urged to nurse her baby during the first year, if nature's supply could be stimulated so that she could do so. . . ." I feel that I must add my mite to the discussion of the general welfare of babies.

Most mothers who have insufficient milk can increase the supply by drinking malted milk three or four times a day. I used three heaping teaspoonsful in a glass of hot water an hour before meals. Coffee is very frequently the cause of the milk drying, though some mothers can use coffee without apparently injuring the milk supply. The quantity is not always affected by coffee, though the quality may be. I know one mother who did not give up her coffee but took malted milk and had quantities of milk. The baby either nursed or cried all the time until it was four months old. It was scarcely more than a skeleton when its grandmother discovered it was hungry. They gave it the malted milk direct after that, and it grew fat and happy. Another baby came to the same mother in less than a year after weaning the first one; she gave up coffee and needed no malted milk to help nurse the second, and he thrived from the start.

Another cause of insufficient milk is acid fruit, etc. Even tomato and orange will cause a decrease in some mother's milk and the baby will go hungry.

Candy and sweets, especially chocolate, will increase the quality and quantity, and I am sure if it is properly explained to mothers they will give up coffee and nurse the baby if they really love it.

About the nipples of nursing mothers, I wish to say that cream butter will prevent any soreness, cracks, or fissures if applied after each nursing for two or three weeks.

New Mexico.

V. G.

THE FOREIGNER IN OUR WARDS

DEAR EDITOR: How many nurses have stopped to think of the helpless position of the many foreigners admitted to our wards, not knowing a word of English? Of how far short we fall from our standards of nursing in caring for these people because we do not speak their language and because we have not the patience to establish an elementary sign language which will be helpful to all? Of the mental anxiety of these poor creatures, who wonder what ails them, what the doctor thinks of them, and what the outlook is?

Have they ever stopped to imagine themselves in their places? If in a foreign land, often alone, not understanding a word,—not speaking enough to even

ask for the bare necessities, not able to send a message to relatives or friends? Not knowing if they were going to live or die in that far off country with their families waiting for them at home?

These thoughts, or rather facts, exist more or less in every hospital ward, and a means of avoiding unnecessary worry and pain to these poor creatures should be the subject of discussion and teaching for the benefit of the nurses. Unfortunately every school has not been able to offer the advantages that Bellevue in New York does, by teaching its nurses both German and Italian, but in hospitals where any particular nationality predominates I should certainly advise classes for the nurses in that particular language. The expense would not be prohibitive and the time spent, perhaps one evening hour weekly, would not interfere with the other studies. I assure them that the look of perfect contentment which they will find in a poor foreigner's eye when he hears even a few words of his native tongue will repay them for any time spent on acquiring these few words.

How can intelligent nursing be done with no means of communication between patient and nurse? How can an accurate record or chart be kept? What nurse can be perfectly satisfied to do such nursing? How often one sees the remark: "patient irrational, talking at random." If "at random" means not talking English, the remark is correct, but if it means that the patient is speaking his own language and perhaps asking for the most rational of things, then the remark is not correct. This fact repeats itself frequently. Many foreigners, particularly the Latin races, are very excitable and temperamental, and this will be placed on the chart as, "patient delirious—insists on getting out of bed, hard to control," when, as often is the case, the patient may want to go to the lavatory, may want a drink, etc. The knowledge of a few words would be most helpful in the ward.

A vocabulary of a few practical words and short sentences would be all that is necessary to prove the value of a better understanding between patient and nurse.

I have tried to teach my nurses the little things which might help, as placing foreigners of the same nationality in adjoining beds, showing them the different lavatory utensils and teaching them what to ask for, the same with water, milk, etc.

It is not much, but it all helps, and perhaps some day the languages will take their place in our training school curriculum alongside of anatomy, physiology, and practical nursing.

ALICE FITZGERALD.

Pennsylvania.

SPRITUAL NURSING IN HOSPITALS

DEAR MRS. HARRIS: I have been much interested in Miss Thayer's "Housing of Nurses during Training and after Graduation" in the May Journal, especially in the suggested apartment idea for after-graduation quarters. One often feels the graduate nurse stands more in need of help, and in many ways, than the nurse before she leaves her school. There is, for the undergraduate, a freedom from care and a camaraderie that go a long way toward happiness. Afterward, even in a hospital, on its staff, the nurse must become a different creature, with different duties and different needs, all of which would be too long a story

for present discussion. Just one phase I wish to touch upon, that of the life of a graduate nurse on "special" duty in a hospital and the inadequate provision there made for her comfort.

I have undertaken no census, and I do not know statistically the hospitals that offer a graduate nurse refined or genteel living while on private duty with individual patients, perhaps there are none. What I do happen to know, and I am almost twenty years a graduate nurse, is the lack of proper care on the part of several, in most ways excellent, hospitals for nurses when they invite in to take care of their very ill or very important patients, continuously by their actions in need of more expert attention than undergraduate nurses may be able to give. Such patients pay a sum, not large, but I venture to assert quite beyond the cost of the maintenance in food of an undergraduate nurse at the same hospital, whose fate in this respect the outside nurse must share, and beyond which she receives no living privileges except access to a room in which may be one or two uninviting beds, for "rest," and a share in a solitary mirror and washstand, and what space she can "grab" for clothes hanging and for changing from street attire to uniform; a privilege she has in common with possibly forty other women, equally fortunate, on private duty with herself and maintaining the prestige of the hospital by their daily or nightly work, beside doing work for which the hospital is paid in excess of her own fee. In conclusion, here is a letter that came to me, without any thought of other than private correspondence, from a more recent graduate, but which I have permission now to put in print:

"Really," it says, "the life of a special nurse is the most artificial I have yet tried and it has fewer compensations, that is, in a material way, in living comfort, certainly while in hospitals on special duty, than any other. There is no let-up on any day from the time that ring of an alarm goes off at 6.30 A.M. till 10 P.M., when you crawl wearily into bed thinking, 'Well it's a shame I didn't write home to-night; my shoes ought to have been polished, my nails are frightfully in need of attention, etc., etc.' Visions of work are apt to haunt your sleep and in the morning you rise and go forth, winter and summer, leaving perhaps still asleep your room-mate, who has no case just now, and who disturbed you when she came in late last night from an evening out. You must be ready for 6.30 hospital breakfast, on duty at 7, and this means an early hour for a lone woman to be crossing town. Often you miss a car, miss another at the transfer, and arrive late at your hospital dressing-room, which is perhaps a 10 X 12, with suit cases piled on top of each other and nurses scrambling all over each other trying to find their clothes. Hoping to save time in the morning you may have the night before, tired as you were, put together your uniform with fresh collar and cuffs; it is found on the floor, where it has been walked on; you are late and must hurry; your cap, which you have made yourself to save twelve and a half cents, and have carefully pinned to your dress, is nowhere to be found. More time lost! You go to the dining-room, where there's nothing on the table but butter and a lot of soiled dishes, and sitting around it 'specials'—also late—fuming and fuming because the maids don't bring them at least a cup of coffee! In despair you go on duty breakfasting, and one of the night nurses lends you a cap. The patient has not slept well and you have to be cheerful and gay to 'lure' her up for breakfast, 'force' that breakfast cheerfully, yet firmly, and not let her know she is being forced, you know the

usual day with a nervous patient. I'd rather try Labrador and see if it isn't better there, where there are no comforts to miss, and if you don't get any breakfast you don't have to hate the dinner put before you and eat cold tongue and still pickles for supper. There you are at least getting the best to be had and you are helping a little where conditions are so in need of help, and the life is what you make it. I believe I'd do something desperate if I staid here, for I can't see why 'specials' should have to put up with this. Isn't there any remedy? Has our alumni association done all it can to help matters and get a few comforts for nurses and make them feel more like being cheerful? I'm pretty cheerful, and I think anyone you asked would say, 'Miss A. is the most enthusiastic nurse I know,' and so I am, usually, but I am not the most enthusiastic being when I go to the dressing-rooms or the dining-rooms, and it's no wonder women of the right temperament for real nursing are not more plentiful. The doctors have no idea what the life of their most necessary 'medicine' is and how much more efficiently work would be done if their helpers were better taken care of. I'd gladly make any sacrifice I knew to be necessary, but I know it isn't necessary for nurses to have to live like this, and I feel like forming a band of the afflicted to rise against it all."

Thus one abounding individual, but the picture is hardly overdrawn. These are stern facts, picturesquely presented. Nurses can do something, and nurses must. Twelve-hour duty, 7 to 7, or 8 to 8, with short meal time off, is hard enough, but to have the living day by day so far short of comfort is a worse condition for gentlewomen than many a factory abuse that humanitarianism seek to remedy. It is probably only a huge oversight on the part of hospitals, but an oversight they cannot continue to permit. If there is anywhere a large hospital that has ideal, or reasonably fair, living conditions for its graduate special nurses we should like to hear of it, and we herewith make profound apologies for slander.

X. Y. Z.

NURSING NEWS AND ANNOUNCEMENTS

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NATIONAL

REPORT OF ISABEL HAMPTON ROBB FUND, JUNE 16, 1913

Previously acknowledged	\$12,766.22
Alumni Association of Seattle General Hospital.....	10.00
Emma E. Koch, R.N., Superintendent Lying-in Hospital, Chicago.....	5.00
Alumni Association of the German Hospital, New York, Elizabeth P. Lindheimer, R.N., Secretary.....	10.10
Alumni Association, N. Y. C. Training School, by Julia M. Lyron (Sustaining)	25.00
St. Vincent's Hospital Nurses' Alumni Association, New York City (Sustaining)	25.00
Pateron General Hospital Nurses' Alumni Association, Pateron, N. J. (Sustaining)	10.00
Janet Gordon Grant, Moses Taylor Hospital, Saranton, Pa. (Sustaining)	10.00
Louise M. Powell, University Hospital, Minneapolis, Minn. (Sustaining)	25.00
Illinois State Association Graduate Nurses, 164 South Michigan Avenue, Chicago, Ill. (Sustaining)	10.00
Nurses' Alumni Association, Pennsylvania Hospital, Philadelphia, Pa. (Sustaining)	20.00
Millmont Northway, Calumet, Michigan (Sustaining)	1.00
Ellen Stewart, Bishop Clarkson Memorial Hospital, Omaha, Neb. (Sustaining)	5.00
Nurses' Alumni Association, Massachusetts General Hospital, by Bessie Fullerton, 125 High Street, Brookline, Mass.	10.00
Maryland State Association Graduate Nurses, Baltimore, Maryland (Pledged)	100.00
Vassar Bros. Hospital, A. A., 269 Mill Street, Poughkeepsie, N. Y. (Sustaining)	5.00
Maryland Homeopathic Hospital Alumni, 2825 St. Paul Street, Baltimore, Md., by Corolla Weber, R.N., Treasurer.....	10.00
Alumni Association Training School for Nurses, Presbyterian Hospital, Philadelphia, Pa., by Florence Longmeyer, Treasurer (Sustaining)	25.00
Connecticut Training School for Nurses, New Haven, Conn., by Emma L. Stone (Sustaining)	5.00

Adams County Nurses' Association, Natchez, Miss., by Nellie F. Baker, Treasurer, 710 Main Street, Natchez, Miss. (Sustaining)	5.00
Members Hartford Hospital Training School for Nurses, Hartford, Conn., by Lander Sutherland, Principal (Sustaining)	25.00
Albany Association, Newark City Hospital, Newark, N. J.	10.00
Massachusetts State Nurses' Association, M. E. Shields, Treasurer, Boston (Sustaining)	20.00
Albany Association of the John N. Norton Memorial Infirmary, Louisville, Ky. (Sustaining)	10.00
Albany Association, Bishop Clarkson Memorial Hospital, Omaha, Nebraska, Missa C. Chaffin, Treasurer (Sustaining)	5.00
Albany Association, Jewish Hospital, Philadelphia, Pa., Irene Sellinger, Secretary and Treasurer (Sustaining)	5.00
Albany Association, German Hospital, Philadelphia, Pa., Elizabeth Rapp, Secretary (Sustaining)	5.00
Albany Association, Salem Hospital, Salem, Mass., Zeider Morre, Treasurer (Sustaining)	10.00
Albany Association, Bayonne Hospital, Bayonne, N. J., Mae Redell, Treasurer (Sustaining)	10.00
Wayne County Nurses' Association, Detroit, Mich., Agnes G. Deane, Treasurer (Sustaining)	5.00
Blanche Sweet, Illinois Training School	\$1.00
Mrs. Jacob Wahl, Passavant Memorial Hospital, Chicago, Ill.	1.00
Miss M. Halverson, Passavant Memorial Hospital, Chicago, Ill.	1.00
Miss F. Rogers, Passavant Memorial Hospital, Chicago, Ill.	1.00
By Ellen C. Glenn, R.N.	4.00
Graduate Nurses' Association of Connecticut, 290 Golden Hill, Bridgeport, Conn., Helena S. Kelly, Treasurer (Sustaining)	10.00
Graduate Nurses' Association of the District of Columbia, Washington, D. C., Zeider Kibler, Treasurer (Sustaining)	25.00
Albany Association of the Johns Hopkins Hospital, Baltimore, Maryland, Elsie Dean, Chairman	250.00
Passavant Memorial Hospital, Chicago, Ill., Clara Baker, R.N. (Sustaining)	5.00
Albany Association of the Butterworth Hospital, Grand Rapids, Michigan, Mary Jane Smith, Treasurer	5.00
Albany Hospital Nurses' Albany Association, Albany, N. Y.	10.00
Total	\$12,435.32

All contributions should be sent to Mary M. Riddle, Treasurer, Newton Hospital, Newton Lower Falls, Mass., and all drafts, money orders, etc., should be made payable to the Merchants' Loan and Trust Company, Chicago.

MARY M. RIDDLE,
Treasurer.

REPORT NURSES' RELIEF FUND, JUNE 1, 1913

Previously acknowledged	\$2843.94
The Mercy Hospital Alumni Association, Davenport, Iowa.....	62.00
Indiana State Nurses' Association	24.00
Maryland State Association of Graduate Nurses.....	50.00
St. Joseph's Hospital Alumni Association, Chicago, Ill.....	20.00
Milwaukee County Nurses' Association, Wisconsin.....	10.00
Total	\$7131.94

Mail pledge cards and contributions to Mrs. C. V. Twin, R.N., Treasurer, 419 W. 146th Street, New York City, and make checks payable to the Farmers' Loan and Trust Co., New York.

L. A. Gammon, R.N., Chairman,
Thirty-third Street and Fowles Avenue,
Philadelphia, Pa.

VERMONT

Rutland.—THE RUTLAND HOSPITAL graduated a class of four nurses early in June. Mary Schumacher, Superintendent of the Brattleboro Hospital, and member of the state board of registration, gave the address to the class. Mayor Henry C. Bishlin presented the diplomas, and Annie A. Alden, Superintendent of Nurses, the class pins. The graduates gave their superintendent a bouquet of roses.

NEW HAMPSHIRE

Franklin.—THE GRADUATION EXERCISES of the class of 1913 of the training school for nurses at the Franklin hospital were held May 27. The program was carried out on the lawn in front of the hospital, camp chairs being arranged for the 100 or more invited friends of the graduates and citizens interested in the hospital. Mrs. Isaac H. Blodgett, of the executive committee, presided. Prayer was offered by Rev. H. C. McDougall. Hon. Henry C. Morrison, of Concord, state superintendent of public instruction and regent of the state board of nurse examiners, gave an interesting address. His talk was very instructive and scholarly. He traced the great advancement made in New Hampshire in recent years in nursing and hospital work. A reception with music followed the exercises.

Hanover.—MANY HITCHCOCK MEMORIAL HOSPITAL held graduating exercises for the senior class on the evening of April 16, in the lecture room of the Tuck School of Finance, Dartmouth College. Prayer was offered by the Rev. Robert Falconer and the music was furnished by an orchestra of college students. The address, which was greatly enjoyed by all present, was by Mary H. Riddle, R.N., Superintendent of the Newton Hospital, Newton, Mass. A short address was made by Professor John King Lord, president of the Trustees, when he presented the diplomas to the class of nine pupils. A reception followed the exercises. On the evening preceding the graduating exercises, a delightful dancing party was given the class by the Alumni Association.

MASSACHUSETTS

Boston.—THE MASSACHUSETTS STATE BOARD OF INSANITY and the superintendents of the various state hospitals held, on May 20, a bi-annual meeting in the State House at which Dr. Edward Cowles read an interesting paper on "The History of Training Schools," and Sara E. Parsons, Superintendent of the Training School for Nurses of the Massachusetts General Hospital, spoke on some of the aspects of training schools in state hospitals for the insane. There was long and earnest discussion, showing great interest among all those present.

THE BOSTON CITY HOSPITAL held graduating exercises of the class of 1913 in the surgical amphitheatre on the afternoon of May 23. There were twenty-four graduates. The exercises were followed by a reception in Veeo House.

THE CUMMINGS HOSPITAL held graduating exercises for the class of 1913 at the Conservatory of Music on the evening of May 29.

THE BOSTON LATINO-IN HOSPITAL TRAINING SCHOOL FOR NURSES made its first formal presentation of diplomas on April 29 in the music room of the residence of Mrs. Charles Hamlin. After a musical program, the diplomas were awarded by Dr. William L. Richardson, the president of the Hospital. Music followed and a social hour. There were thirty-seven members in the class (not all of whom could be present), representing twelve general training schools; ten of these are occupying institutional positions. The Hospital was incorporated in 1892, and the Training School established in 1899.

CONNECTICUT

New Haven.—THE ANNUAL MEETING of the Alumni Association of the Connecticut Training School was held June 4, at 3 P.M., in Hotel Bishop, with the president in the chair. Officers elected were: president, Anna Barron; vice-presidents, Miss E. E. Bigelow, Miss E. Payne; treasurer, Mrs. M. J. C. Smith; secretary, Mrs. I. E. Wilson; Executive Board, Mrs. Fleischner, Miss Lanfear, Mrs. March, Miss M. E. Stank.

The meeting then adjourned to allow the members to be hostesses for the dinner given to the graduating class of twenty-one at 6 P.M. During that time Mrs. I. E. Wilson, class '31, read a paper on early days of the Connecticut Training School.

At 6 P.M. the class had their graduating exercises in Gifford Chapel, on the hospital grounds, receiving their diplomas. Professor Bacon gave an address and Mrs. Fairchild read a history of the training school; later the usual social time followed.

Miss Emma Stone, who for eleven years has been superintendent of the training school, left the hospital about the middle of June. She was presented with a beautiful pin by members of the alumni, and also one by the graduating class.

The following day at Hotel Taft, a reunion of about 150 graduates of Connecticut Training School occurred, which was greatly enjoyed, and followed by a banquet in the Palm Room at 4 P.M., with the delightful round tables

made very attractive with the Connecticut state flower, the mountain laurel. As the school was organized in 1872, this year made the fortieth anniversary of that event, and it was delightful to have assembled graduates from Canada and many of the states. Miss Barron, president of the Alumni Association, presided, calling on one from each class present for remarks, and about two-thirds of the classes since 1875 responded.

Many regrets were expressed that Rachel Barley, of Northampton, Mass., the only surviving graduate of the first class of 1875, could not be present, but a very charming letter was received from her instead.

As an effort is being made to learn the whereabouts of every one who has received a diploma from the Connecticut Training School will any one who sees this notice kindly send her address to Mrs. J. E. Marsh, 938 Howard Avenue, New Haven, Conn., that an address book can be formed for future occasions.

Hartford.—THE HARTFORD HOSPITAL TRAINING SCHOOL held graduating exercises at the nurses' residence on the evening of June 11. The address was given by Arthur L. Shipman, the prizes were awarded as follows: Senior Year: Lanny Stuart Barton, First Prize of \$50.00, donated by Dr. G. C. Smith; Aida Harriet Salmon, Second Prize of \$25.00, donated by a Member of the Executive Committee. Intermediate Year: Bertha Henrietta Uselmier, First Prize of \$50.00, donated by Mr. Austin C. Dunham; Ethel Eva Hall, Second Prize of \$25.00, donated by a Member of the Executive Committee. Junior Year: Greta Mae Ferris, First Prize of \$50.00, donated by Mr. Austin C. Dunham; Eva Anna Crowdie, Second Prize of \$25.00, donated by a Member of the Executive Committee. There were thirty-two in the class. A reception followed the exercises. Each member received from Mr. A. C. Dunham a copy, either of "Making Good on Private Duty," or "Private Duty Nursing."

Middletown.—The meeting of the Connecticut Association of Superintendents and Instructors of Nurses was held in the Nurses' Residence, Middletown Hospital, on May 22. The meeting was called to order at 2.30 P.M., the president, Miss Sutherland, in the chair. There were thirteen members present. The minutes of the last meeting and the treasurer's report were read and accepted.

Application for membership in the National League of Nursing Education has been sent to Miss Cotton, Secretary of the Association, but no reply can be expected until after the meeting in Atlantic City. Since the last meeting five new members have been added, making fifty-one in all. The program was as follows:

1. Discussion of Examination Papers of Candidates for State Registration. Members of the Board.
2. Informal discussions on the following questions:
 1. In accepting as pupils those who have spent time in some other school and have left for some good reason, what allowance for time, if any, do you make?
 2. How do you regulate hours on and off duty for special nurses?
 3. Occasionally we hear complaints from patients about being awakened too early in the morning. What can we do about it?
 4. How much time in a three-years' course should be given to practical work on a district?

6. Should preparation for public health nursing be required or made elective?
6. How to cultivate first, initiative; second, ambition in our pupils so that after graduation they will not simply pursue the path of least resistance, but prepare to fit themselves for wider fields of usefulness?
7. Do we spend too much time on subjects not of the first importance in nursing, to the exclusion of others of greater importance?

Dr. Jennie Fisher, Pathologist at State Hospital for the Insane, gave a most interesting talk on "Common Colds." In training schools and other institutions where colds are prevalent at times, she advised complete isolation of the person so affected and the use of vaccine as preventive.

There was an exhibition of surgical dressings by Backus Hospital (Norwich), Middlesex and Hartford Hospitals.

Miss Wood, Superintendent of Middlesex Hospital, was hostess at afternoon tea which was served in the beautiful living room of the nurses' new residence, the latter having been opened only a few days before.

Miss Wilson invited the members to hold the next meeting in Stamford Hospital, Stamford, Conn.

NEW YORK

New York.—THE ANNUAL MEETING of the New York County Registered Nurses' Association was held at the Academy of Medicine on the evening of Tuesday, June 2. The following officers were elected: Elizabeth Golding, R.N., president; Amy Putnam, R.N., vice-president; Nora Charlen, R.N., recording secretary; Beatrice M. Bamber, R.N., corresponding secretary; Emma Downing, R.N., treasurer; Jennie McVean, R.N., trustee for three years; Jennie Gersenthal, R.N., Anna S. Russell, R.N., and Amy Hilliard, R.N., executive committee; M. M. Russell, R.N., credentials; Irene Yocum, R.N., by-laws; Anna C. Maxwell, R.N., press and publication; Jennie Gersenthal, R.N., finances; Mrs. Brookway, R.N., lectures and papers; Mrs. Hugh Jack, R.N., legislation.

The reports from the treasurer and the governing board were very encouraging and full of interest.

Miss Goodrich as Chairman of the Legislative Committee of the New York State Nurses' Association, and Mrs. Brookway as Chairman of the Legislative Committee of the County Association, gave very full and detailed reports of the work carried on in Albany during the winter on behalf of the proposed amendment to our Nurse Practice Act.

The next meeting of the association will be held on the evening of the first Tuesday in October at the Central Club.

THE BELLEVUE ALUMNÆ ASSOCIATION held its annual meeting at Osborne Hall on May 14, when the following officers were elected: president, Beatrice M. Bamber; vice-presidents, Mrs. Lambert Humphrey, Anna W. Kerr; recording secretary, Marian E. Rotman; corresponding secretary, Edith A. Sampson; treasurer, E. G. Paulding; directors, serving the second year, Emma J. Fowler, Mary Reading; directors elected for two years, Alice Emmons, Carrie J. Brink, Caroline M. Curtin.

THE ANNUAL DINNER OF THE BELLEVUE ALUMNA ASSOCIATION OF NURSES was held at Osborne Hall, 426 East 30th Street, on the evening of June 8. Members of the graduating class of 1913 at the training school were invited as guests of the association. Eighty-four members were present, representing twenty-six classes, ranging from 1877 to 1913—a very enjoyable meeting of old and new friends. After dinner remarks were made by Carrie J. Brink, Annie Damer and Emma Cameron, speaking of the 10th Century nurses. Clara D. Noyes, Superintendent Bellevue and Allied Schools, also spoke. Miss Green spoke for class of 1912, and Miss Walker for 1913. Poems were read by Miss Mayton and Anna Kerr, the other speakers being Mary Minor, Emily Kerr and Virginia Rayson.

WORK WAS BEGUN on the New Wing at Osborne Hall, Bellevue-Alumna Nurses' Club, at 426 E. 30th Street, on April 30th, of practically the same design as the original structure, six stories in height, with a salarium and open air sleeping accommodation for twenty people in addition. There will be in it sixty-five single sleeping rooms, somewhat smaller than the old rooms. It has been suggested that six of these rooms be always kept in reserve for Bellevue nurses who may come from out of town for a rest or holiday.

The applications for rooms were so numerous last winter that the house could have been twice filled, and E. Johnson, the manager since its opening, has been pushed to always accommodate those for whom the house was originally intended, though no Bellevue nurse has ever been turned away. The contractor has promised to deliver the finished building on March 1st, 1914, although it is hoped it may be possible to occupy some of the rooms before that time.

ON THE EVENING OF MAY 31st the class of 1913 presented to the Bellevue Nurses' Residence a picture of Miss Brink, the supervisor of nurses. Miss Noyes spoke in a happy vein of Miss Brink's uniformly faithful service during twenty years, and several of Miss Brink's early associates testified to the high standards she always maintained as a pupil. The presentation was made by Miss Allen, the president of the class, and music and refreshments followed the unveiling.

MISS LOUIE MINNEMANN, Superintendent of Nurses in the Savannah Hospital, Savannah, Ga., has called for England for a two months' holiday. While in New York she gave a tea to the members of the Bellevue Alumna Association.

THE REX CROSS HOSPITAL held graduating exercises at Hotel Majestic, May 22. A class of five were presented with diplomas by Mr. Allen Wardwell, President of the Hospital, and badges by Dr. Jackson Mills. Dancing followed the exercises. Jane Dickson, superintendent of the hospital for four and one-half years, has resigned and will leave her position July 1.

BROOKLYN.—THE ANNUAL DANCE, given May 14th, at the Registry, by the Alumna Association for the graduates of the class of 1913, Long Island Hospital, was a decided success. The Mims Hays, Ring and MacDonald, who composed the entertaining committee, were indefatigable in making it so. A graceful and merry throng participated in the dances. Miss Lewis, Superintendent of the Training School, honored the occasion with her presence, and Miss Hays, chairman entertaining committee, with her usual graciousness made an excellent hostess.

THE FOURTEENTH ANNUAL GRADUATING EXERCISES of the Kings County Hospital Training School were held on May 1st, in the chapel, with Dr. Thomas L.

Fagnety, Second Deputy Commissioner of Public Charities, presiding. There were 20 graduates. Mary Hofter, of Lawrence, Mass., received the Honor Medal; Loretta Flannery, New York, receiving honorable mention. A reception and dance followed the exercises in the Nurses' Home. The annual dinner of the Alumni Association was held on May 26th, at the Nurses' Home, with thirty-five members present. Following the dinner a dance was held and the evening was voted a great success by those present.

THE MANHATTAN STATE HOSPITAL GRADUATES have formed an alumni association and are issuing a quarterly called *The Manhattan State Hospital News*.

THE ALUMNI ASSOCIATION OF THE TRAINING SCHOOL OF THE LONG ISLAND COLLEGE HOSPITAL held its annual meeting recently and elected the following officers: president, Edith Brown; vice-presidents, Margaret Almale, Jennie E. Wiley; treasurer, Mary Fraser; corresponding secretary, Mrs. M. Moore; recording secretary, Mrs. J. W. Cavens; director, Anna Schmitz. A vote of thanks was accorded the retiring officers, whose recognized and satisfactory work in the past, merits sincere praise. The members are glad to record the re-election of some of the well-known who, like the standard works in a library, are always helpful. A warm welcome awaits the in-coming officers. Their future duties will not only prove but emphasize their efficiency. Miss Brown, the president, was for several years, superintendent of nurses of Hahnemann Hospital, New York. The regular monthly meeting was held May 12, at the registry, Miss Brown presiding. The representative members present were fortunate in being treated to a most interesting informal talk on settlement work, by Jane Elizabeth Hitchcock, Secretary of the Humane Board. She is so favorably known, and all hope to have the pleasure of hearing her again in the near future. Miss M. E. Robinson, Superintendent of Nurses of the Samaritan Hospital, Brooklyn, was elected delegate to the annual convention of the American Nurses' Association.

Rochester.—THE ROCHESTER GENERAL HOSPITAL held graduating exercises for a class of twenty-four on the evening of May 20, Charles F. Pond, vice-president of the board of trustees, presided. The address was given by Dr. George W. Ocker, the class was presented by Dr. John F. Whitbeck, president of the staff, and the diplomas were presented by Mrs. Arthur Robinson, president of the board of lady managers.

THE ROCHESTER HOMOEOPATHIC HOSPITAL held graduating exercises on the evening of June 12, at the Eastman Home, for a class of thirteen.

Cambridge.—THE FARMER'S FARM THOMPSON HOSPITAL held graduating exercises on the afternoon of June 10 for a class of six nurses.

Oneonta.—THE HUDSON VALLEY LEAGUE FOR NURSING EDUCATION met at the Glass Falls Hospital on May 10. This was the last meeting of the season and was of a purely social nature. The members were entertained at luncheon by Miss Chas and her assistants and afterwards enjoyed a delightful ride to Lake George. The next meeting will be held with Miss Littlefield at the Homoeopathic Hospital, Albany, on September 27. This will be the annual meeting of the League, the election of officers taking place at this time.

Buffalo.—THE BUFFALO HOMOEOPATHIC HOSPITAL held commencement exercises on the evening of June 2, for a class of six nurses. The speaker of the evening was Rev. Murray Shipley Howland.

PENNSYLVANIA

Philadelphia.—AT THE MAY MEETING of the Episcopal Hospital Alumni the following delegates were elected to attend the American Nurses' Association Convention in Atlantic City: Rebecca Jackson, Harriet E. Parker, S. Maude Mutchler. Mrs. N. F. W. Crossland, a permanent member, also attended the convention. Fifty (\$50) dollars was voted to be paid to the Philadelphia Y. W. C. A. Building Fund.

After the business meeting Dr. Thomas R. Nelson, senior surgeon of the hospital staff, gave a profitable address on "Some Ethical Problems in Nursing." The class of 1913 were present.

THE ALUMNI ASSOCIATION entertained the class of 1913 (34 graduates) Monday evening, May 19, at the Nurses' Home, with music, recitations, dancing and a delightful collation.

THE ANNUAL MEETING of the Episcopal Hospital Nurses' Alumni was held June 3, at the Nurses' Home, and the following officers were elected: president, Mrs. N. F. W. Crossland, R.N.; vice-presidents, Clara J. Neffling, R.N., Annie C. McDowell, R.N.; secretary, Olive Brown; treasurer, Harriet E. Parker, R.N.; executive committee, S. Maude Mutchler, R.N., Chairman, Harriet M. Gillette, R.N., Clara C. Tallman, R.N., Irene Runaga, R.N., Lily L. Lane, R.N. Twenty-five dollars was voted to be given to the Nurses' Relief Fund. Thirty-one members have been added to the alumni during the year, making a total of 167 members in good standing. A special feature of interest to nurses has been given at eight of the nine meetings held during the season.

THE TEMPLE UNIVERSITY SAMARITAN HOSPITAL NURSES' TRAINING SCHOOL gives a course of readings for nurses in regular training who wish to prepare to act as companions as well as nurses to invalids. The course is open to all nurses and leads to the diploma of companion nurse.

THE GARRISON HOSPITAL TRAINING SCHOOL will hereafter require the third-year nurses to read a number of the books in the companion nurses' course and the AMERICAN JOURNAL OF NURSING.

THE ALUMNI ASSOCIATION of the Hospital of the University of Pennsylvania held the annual meeting at the Philadelphia Club for Nurses, on June 2. The association is in fine condition financially. Five new members were received. A very interesting letter was read from Alma Pittman, who is a missionary nurse in China, which made China seem much closer to Philadelphia than ever before. After the business meeting was over, the nurses living in the Club were invited in to meet Helen Glenn and hear her interesting talk on "Social Service." Music and refreshments closed the happy evening. Katherine Dempster, R.N., resigned as Director of Nurses at the Presbyterian Hospital, Pittsburgh, to accept the position of superintendent of the same hospital.

THE NURSES' ALUMNI ASSOCIATION of THE PHILADELPHIA GENERAL HOSPITAL held its regular monthly meeting on May 3, in the nurses' home, Miss Van Thyne presiding. The committee investigating the difficulties of the Club House reported no co-operation in the part of the residents of the Club and an apparent wish on their part that the association take no further steps, its assistance not being desired. A motion was carried that the committee be relieved of further obligation. A letter was read from Hoover & Smith, asking for instruction about making school pins for graduates, whose first pin had been lost,

and who desired it replaced. Fifteen months ago it was decided by vote that a second pin would under no circumstances be allowed. A discussion followed, Miss Arnold reporting that an alumna has already loaned her pin to an unauthorized Jeweler who has made a die from which pins are made and sold as desired, at an advance on the price charged by Hoover & Smith. A committee was appointed to consult with Hoover & Smith as to the cost and advisability of having the school pin patented, thus making it an infringement for any other firm to duplicate the said patent: Miss Arnold, Chairman, Miss Kirwan and Mrs. Wernuth. Misses Crandall, Lafferty, Symonten and Wright were elected delegates to the American Nurses' Association. The committee on investment of the Memorial Home Fund had no progress to report. Miss Osborne spoke briefly on the splendid work done by the Red Cross Society in the flood district of Ohio, Miss Deane and Miss Greenwood being particularly active. An especially interesting item from Miss Osborne was that her first private duty "baby" is now doing good work in the Balkan War district. A social hour followed.

THE NURSES' ALUMNA ASSOCIATION of the Howard Hospital, of Philadelphia, held its annual meeting May 18, 1913 at 3 P.M., at the hospital, with twenty-one members present. Twelve new members were taken into the association. Officers elected for the following year were: president, Nettie E. MacNab; vice-president, Judith Houghton; treasurer, Blanche E. Henninger; secretary, Mrs. Carrie W. Price. After the annual meeting a special meeting was called and the association pledged itself to raise one thousand dollars (\$1000) toward the building fund for the new hospital. A noon shower followed the meeting for Miss Barrett, the retiring superintendent. Miss C. M. Gorman has resigned her position as head nurse of the Howard Hospital and has gone back to private work. Judith Houghton has accepted the position of assistant superintendent at the Baby Hospital at Wynnsfield, Pa.

Pennsford.—**THE FARMER'S HOSPITAL TRAINING SCHOOL** held graduating exercises on May 27 at the hospital. An address was made by Dr. Elizabeth C. Spenser, of Harrisburg. President of the Board of Managers, Alexander C. Wood, presented the diplomas to the fourteen nurses. After the presentation a collation was served to the nurses and their visiting friends; inspection of buildings and grounds followed. The first anniversary of the Friends' Hospital Alumnae was also held on that day, with Mrs. Jessie DeL. Ulrich as president, Miss Margaret Delaney as secretary, and Miss Rose Kersten as treasurer. They had a delightful meeting, as there were 50 of the former graduates present. On June 4 the hospital celebrated its Centennial Anniversary, it being next to the oldest institution exclusively for mental and nervous diseases in the United States, the oldest being located at Williamsburg, Va.

West Chester.—**THE ANNUAL MEETING** of the Alumna Association of the Chester County Hospital was held at the hospital, May 23, 3 P.M., the president, Mrs. J. Oscar Dicks, presiding. Officers elected were: president, Mrs. J. Oscar Dicks; vice-president, Fannie Hoopes; secretary, L. P. Smith; treasurer, M. J. Stevenson. After a brief discussion of other business, Ida F. Gilis, President of the State Association, gave an informal talk on "State Registration for Nurses," which was very interesting and thoroughly enjoyed by those present. The meeting was then adjourned, until the regular meeting in August.

Miss Gilis was the guest of Mrs. J. Oscar Dicks at dinner and also at the commencement exercises which were held in the evening.

Lohman.—**THE GOOD SAMARITAN HOSPITAL**, of Lohman, graduated a class of three nurses on May 22. The Rev. A. A. U. Birmingham made the address.

MARYLAND

Baltimore.—THE MARYLAND STATE ASSOCIATION OF GRADUATE NURSES held its regular spring meeting in the new Henry Phipps Psychiatric Buildings, Johns Hopkins Hospital, April 22. The meeting was called to order by the president, Mrs. E. F. Clark. After a short business session, Dr. Winford H. Smith, superintendent of Johns Hopkins Hospital, was introduced to the nurses, and in a most delightful manner gave a short sketch of the proposed work of the new Psychiatric Clinic just opened. At the close of the meeting the nurses were taken in charge by Elsie Taylor, superintendent of this branch of the hospital, and her assistants, and shown through the beautiful buildings and grounds. The appointments are all so perfect and attractive that while the members were not quite ready to ask permission to remain as patients it would not have taken much persuasion to have retained them as nurses. About two weeks previous to this meeting Miss Lawler, superintendent of nurses, entertained the State Association at the Nurses' Home of Johns Hopkins Hospital. A large number were present and a very happy evening was spent together.

THE NURSES' ALUMNAE ASSOCIATION OF THE MARYLAND UNIVERSITY HOSPITAL held a meeting in the class room of the training school, on May 6. The attendance was good, the large number of young graduates present being most encouraging. A committee of nurses, who had graduated within the last two or three years, headed in \$250.00, money it had raised to add to an endowment fund which had been started by the alumnae about six years ago. This same committee has pledged itself to keep the good work up until it has succeeded in making the sum on hand \$1000, and this it has determined to accomplish before the end of the year. Two delegates were sent to the convention at Atlantic City.

THE MARYLAND UNIVERSITY HOSPITAL TRAINING SCHOOL FOR NURSES held graduating exercises at Lohman's Hall, on May 10. The hall was filled to its utmost capacity with the friends of the twenty members of the class. Exercises were opened with prayer by Dr. Arthur B. Kinsolving, of St. Paul's Episcopal Church; following the prayer, Mr. Charles J. Bonaparte, a member of the bar of Baltimore, addressed the class. At the close of the exercises the chairs were removed from the hall and dancing became the order of the evening. A beautiful and time-honored custom of this school is the communion service, which is held at St. Paul's church for the graduating class at seven o'clock on the morning of Commencement Day. The evening following commencement, the Alumnae Association entertained the graduating class in the reception room of the Nurses' Home. The president of the alumnae in a short talk urged the class to at once unite themselves not only with their alumnae but also with their state and national organizations and tried to make them see that it was both a privilege and a duty which they owe to themselves and others. The rest of the evening was spent in a social gathering.

MISSOURY HOSPITAL TRAINING SCHOOL held graduating exercises on May 10 at Mercy Hospital. The graduating class numbered eighteen. During this same week Church Home and Infirmary Training School and the Training School of St. Joseph's Hospital held graduating exercises. The classes from all of these schools are quite large.

Schillsville.—AT THE STATE SANATORIUM FOR TUBERCULAR PATIENTS, four nurses received diplomas on May 16. This is the first class to graduate from this institution, which gives a two years' course in the nursing care of tubercular patients.

VIRGINIA

THE VIRGINIA STATE NURSES' EXAMINING BOARD will hold its semi-annual examination for the registration of graduate nurses on Tuesday and Wednesday, July 9 and 10, beginning at 9 A.M., at St. Andrew's Hall, corner Cherry and Beverly Streets, Richmond. For information, address MARY M. FLETCHER, R.N., Secretary, Leabury, Phone, Madison 385, Richmond.

THE VIRGINIA HOSPITAL TRAINING SCHOOL FOR NURSES held their last commencement exercises at the John Marshall High School Auditorium on May 24, at 8.30 o'clock. There were twelve graduates. After the exercises a dance was given at the Elk's Home. With the closing of this school the nurses will be transferred to the Memorial Hospital. Miss Agnes Randolph, former superintendent of the Virginia Hospital has been appointed superintendent of the Memorial Hospital, with Dr. R. W. Miller as manager.

ON THE EVENING OF MAY 22, in the Auditorium of the Jefferson Hotel the Commencement exercises of the Johnson-Willie School for Nurses were held. There were seven graduates. Laura Darlington, superintendent of the hospital, was presented with a school pin for faithful services rendered.

THE NURSES OF THE STATE held commencement exercises at the Mechanics' Institute on May 18, at 8.15 P.M. Diplomas were given to nine nurses. Miss Flippo, the Superintendent, was highly complimented regarding the efficient work of the school and hospital.

IN THE AUDITORIUM of the John Marshall High School on the evening of May 22, the graduating class of the Memorial Hospital Training School celebrated the completion of the third year of preparatory study and received their diplomas and school pins. There were thirteen graduates. A loving cup was presented to Dr. Louis C. Barker, the retiring president of the hospital and honorary member of the Alumni Association, by Miss Florence Black in behalf of the Association. The address of the students of the Training School was shown for Miss Van Wert, the retiring superintendent, in the shape of a silver loving cup of generous proportion. The exercises were most interesting, there being a most uplifting address by Bishop Dennis J. O'Connell. Fun for the audience was afforded by the reading of the Class History by Nell V. Lynn, and the Class Prophecy by May Ann Barker, both documents containing many kindly meant shafts of wit, directed to the staff and various members of the class. After the exercises there was a banquet at the Jefferson Hotel given by Dr. Louis C. Barker, at which the graduating class were introduced to the Alumni of the school and invited to join the Association. The benedictory sermon was preached the Sunday preceding in the Second Presbyterian Church.

NORTH CAROLINA

EXAMINATIONS for registration were held at Asheville, May 20-22, when fifty-one nurses were successful in passing. The highest averages were made by Lottie Williams, Mission Hospital, Asheville, and Marie Stanford, St. Peter's Hospital, Charlotte.

WEST VIRGINIA

Wheeling.—THE REGULAR ANNUAL MEETING of the Ohio County Graduate Nurses' Association was held at the North Wheeling Hospital, Thursday, June 12, at 3 P.M. Seven members were present. Reports from officers and committees were heard. The sick committee reported the illness of one member, that of Winnie Wilson, who had a mastoid operation performed at the Lakeside Hospital, Cleveland, recovering from the operation. No new business was taken up except voting on new members. The meeting then adjourned until October.

KENTUCKY

THE ANNUAL MEETING of the Kentucky State Association of Graduate Nurses was held in Louisville, June 3 and 4, in the Art Room of the Public Library. The opening session was called to order at 10.30 A.M. Tuesday morning by the president, Mary A. Alexander. His Honor, Mayor W. O. Head, heartily welcomed the gathering, and urged that Louisville be made the regular place of meeting. He said, "The latch-string hangs out for you—the city is yours."

To this most cordial greeting, Clara Fisher, Jewish Hospital, made a happy response. The program submitted to the Executive Board by the Arrangement Committee, with G. G. Collins, R.N., as its able chairman, was carried out with enthusiasm and interest.

At the close of the afternoon session on Tuesday automobiles were in readiness to take the nurses to the new City Hospital, where they were the guests of the superintendent, Dr. J. W. Fowler, for a tour of inspection. The beautiful building, with a capacity of 500 beds, and so splendidly equipped, won the heartiest praise and admiration.

The reception given Tuesday evening, at the Burnham Nurses' Home, by Jane Barry, R.N., superintendent, Jewish Hospital, was a most brilliant affair. The myriads of Japanese lanterns made the grounds look like fairyland. Refreshments were served from a tent on the lawn. An exquisite musical program was rendered.

Among those present at the convention from out in the state were Miss Green Davis, Superintendent, Owensboro City Hospital, who brought a cordial invitation for the next annual meeting from the lady and physicians, as well as the nurses of Owensboro; Miss Steinhauer, Superintendent, Spence Memorial Hospital, Dayton, Ky.; and Miss Halloran, Dayton, bringing with them fifteen applications for membership in the State Association.

In a burst of enthusiasm which declared the gathering to be the most successful in the history of the organization, the seventh annual meeting came to a close, after which the members and visitors were guests at tea of Miss Gage, R.N., superintendent of Norton Infirmary, and in the evening at a theatre party at Fontaine, Ferry Park, given by the Louisville Convention and Publicity League.

Forty-two new members were received and welcomed during the meeting, making a total of 101. Miss Green Davis, chairman of committee on resolutions, voiced the sentiments of the assembly by offering sincere thanks for the hearty co-operation of the public in general and the nurses in particular. A final appeal

was made for the necessity of realizing the opportunity for presenting a bill to secure registration for nurses, and the work which must be done to secure its passage in the next assembly.

The election of officers resulted as follows: president, Mary A. Alexander, 1323 Niagara Avenue, Louisville; vice-presidents, Flora Keene, R.N., Franklin, Annie L. Allen, Henderson; recording secretary, Emma Isaacs, Louisville; corresponding secretary, Elizabeth Stuart Robertson, 209 W. St. Catharine St., Louisville; treasurer, Katherine Jenkins; chairman of standing committees: ways and means, Ida Beckman, Louisville; credential, Meta Baum, Louisville; nominating, Mary C. Vary, Louisville; publication and press, Mrs. J. J. Telford, Glasgow; arrangements, Carolyn C. Collins, R.N., Louisville.

Louisville.—THE LOUISVILLE LEAGUE FOR NURSING EDUCATION was organized at a called meeting of superintendents and head nurses held on April 30. The following officers were elected: president, Jane Barry; vice-president, Alice M. Gage; secretary, Mrs. F. McClelland; treasurer, Mary Foreman; committee on constitution and by-laws, Eliza Johnson, Mary Porter, Miss Fisher. Meetings will be held on the second Wednesday of each month.

OHIO

Cleveland.—THE GRADUATE NURSES' ASSOCIATION AND RED CROSS NURSES held a joint meeting on June 10, at the Isabel Hampton Robb Club. Mary E. Gladwin, State Secretary of the Red Cross Nursing Service, gave a very interesting address on the Red Cross Nursing at Dayton.

Hiram Gilson has resigned her position as superintendent of nurses at the City Hospital.

Agnes Allen has resigned her position as night supervisor at St. Luke's Hospital to take up private duty in Cleveland.

THE ST. VINCENT CHARITY HOSPITAL GRADUATE NURSES, under the auspices of the Florence Nightingale Club, held their 55th annual May Party at Andrews's Dancing Academy on May 19. Too much praise can hardly be given the club for the delightful evening. The social spirit, refinement and charming personification of the club members united to make the party one of the most enjoyable ever given by the club. The happy faces of all present indicated a genuine appreciation of their efforts; and each was sorry that a whole year would intervene before the next Florence Nightingale May Party. The benefit was donated to the Nurses' Home of St. Vincent Charity Hospital.

Dayton.—THE ASSOCIATION OF GRADUATE NURSES OF DAYTON AND VICINITY held its annual meeting in the nurses' home of the Miami Valley Hospital on May 20, Miss Morgan presiding. The attendance was unusually good. It was decided to have a picnic in June, the regular June meeting being postponed until the third Tuesday in July in order that the delegate to the American Nurses' Association, Lillian Gilman, may give her report. The nominating committee presented names for officers for the coming year. The treasurer's report was given. A new question is being agitated, and it has been moved that a sum be taken from the treasury and set aside as an endowment toward the foundation of a fund looking toward the establishment of a Nurses' Home and Club, and money

may be added to from time to time and if not used for the specified purpose at the expiration of five years, it will be returned to the treasury. The meeting was opened by the reading of a most interesting paper, written by Helen Briggs, on Teachers College, Columbia University, read by Lela Sellers. The paper gave a clear insight into the wonderful progress being made in the nursing world. It was greatly enjoyed by all.

Youngstown.—THE YOUNGSTOWN HOSPITAL held graduating exercises May 26. Mary E. Gladwin gave the address to the class and Ruth Foutland the class pin.

Massillon.—THE CITY HOSPITAL graduated six nurses on June 5. Mary E. Gladwin addressed the class. There was an interesting program.

Warren.—THE CITY HOSPITAL or WARREN held graduating exercises June 6. Mary E. Gladwin gave an address and Mary E. Sarkey, the superintendent, presented the class pin. There were a number of speakers and a fine musical program.

MICHIGAN

Detroit.—ST. MARY'S HOSPITAL TRAINING SCHOOL held graduating exercises on May 26, at Knights of Columbus Hall. Rt. Rev. Bishop Foley gave the address. Dr. Eugene Smith presented the diplomas to the sixteen nurses in the class.

HUNLEY HOSPITAL (name of city not given) held commencement exercises in the Court Street Methodist Church on June 4, for a class of four nurses. Mr. E. D. Black, president of the board of managers, presided and presented the diplomas. The address was given by Dr. H. E. Randall. The Florence Nightingale Pledge was recited. Dr. M. E. Knapp presented the school pin. A reception followed at the nurses' home.

INDIANA

Indianapolis.—THE MARION COUNTY GRADUATE NURSES' ASSOCIATION held its annual picnic on June 11 in a beautiful country grove owned by one of the nurses. The day was ideal, and about forty boarded the excursion at 9:30 A.M. with huge baskets of food, dignified and otherwise. The day was spent in lounging, eating, telling tales, playing ball, toasting marshmallows and planning for the trip to Atlantic City.

Mrs. ANN ARROW, SUMNER AND WHITMAN are taking a three weeks' trip through the Yellowstone Park.

Mrs. L. FRASER sailed on May 26 for several months in Europe. Most of the summer she will spend in Germany.

ERMA MURPHY has received an appointment from the United Presbyterian Board of Missions as nurse to be stationed at Sialkot, Punjab Province, India, and will sail in August.

JAMES HUNT, R.N., who recently resigned her position as Superintendent of Nurses in the M. E. Hospital, has gone to her home in North Manchester, for a rest and later will go to Green Hospital, Detroit, for the course in Hospital Administration.

Miss M. F. FURRILL and Lora Gault have been appointed to assist Miss

Susan Kinzli in the Children's Aid Association, and Miss F. E. Gerard is again in charge of the children's playground at Riverside Park.

At the ANNUAL MEETING of the Indiana State Board of Examination and Registration of Nurses, the incumbent officers were re-elected. M. D. Currie, R.N., president; and Edna Humphrey, R.N., secretary.

By a recent act of the Legislature the board is enabled to pay the secretary for her entire time.

There were eighty-nine applicants for registration on May 28 and 29.

Port Wayne.—Miss ERYAN, class of 1911, Hope Hospital Training School for Nurses, has been appointed visiting nurse for the Metropolitan Life Insurance Company. This is the initial step in this line of work which was commenced May 2.

ILLINOIS

AN EXAMINATION FOR THE REGISTRATION OF NURSES, in Illinois, will be held in the Civil Service Commission Rooms, No. 847, County Building, Chicago, Ill., July 18 and 19. Applications may be procured from Mary C. Wheeler, R.N., 127 N. Dearborn Street, Chicago, Ill.

Chicago.—MARY C. WHEELER assumes her duties as superintendent of the Illinois Training School for Nurses on July 1. Miss Wheeler is a graduate of the school and of the department of Nursing and Health, Teachers College. She was for some years superintendent of Blessing Hospital, Quincy, and has been recently secretary of the Illinois Board of Nurse Examiners and Inspector of Training Schools. She has also been president of the National League for Nursing Education for two years.

THE ALUMNAE ASSOCIATION of the ILLINOIS TRAINING SCHOOL FOR NURSES held its annual banquet at the Hotel Sherman on May 28, with a large attendance. Miss Wheeler, who is concluding her term as president, acted as toastmistress. The toasts were responded to by Daisy Uvoh, class of 1913; M. G. Miller, class of 1901; and Jennie Bruce, class of 1907. Helen W. Kelly has accepted the position of superintendent of school nurses. She also succeeds Miss Wheeler as president of the alumnae association.

At the ANNUAL MEETING of the Illinois Nurses' Educational League, held on the third Saturday in May, the following officers were elected: Harriet Palmer, R.N., president; Ellen G. Glenn, R.N., vice-president; Marie Jorgensen, R.N., secretary; Mabel McFarland, R.N., treasurer. Chairman of standing committees elected are: May Collins, R.N., eligibility; Mary Wheeler, R.N., program; Adelaide Walsh, R.N., arrangements.

At the ANNUAL MEETING of the Nurses' Round Table of Chicago, held on May 21, the following officers were elected to serve for the coming year: president, Harriet Palmer, R.N.; vice-president, Mary Wheeler, R.N.; secretary-treasurer, Margaret Kane, R.N. The advisory committee is composed of Mrs. Frederick Tice, R.N., Helma MacMillan, R.N., and Sister Camilla.

HANNA FURMAN, R.N., who for many years was Superintendent of Nurses, Visiting Nurse Association of Chicago, has been appointed Extension Secretary of the Illinois State Association for the Prevention of Tuberculosis. She will organize the work in rural districts throughout Illinois. Her headquarters are in Chicago.

THE MICHAEL REESE HOSPITAL TRAINING SCHOOL FOR NURSES graduated a class of twenty pupils on June 2. The exercises were held at the Standard Club.

JACKSONVILLE.—ORGANIZATION OF DISTRICT NO. 12, of Illinois, at a meeting at PASCANANT MEMORIAL HOSPITAL, on April 2, of the available nurses of District No. 12 (comprising counties, Morgan, Sangamon, Cass, Mason, Monard, Christian and Scott), Mrs. W. E. Bush, R.N., of Chicago, was present and gave a very interesting and helpful talk on District Organization, Red Cross Nursing Service, and the Nurse's Bill. The advantages of organization being obvious, the question for immediate organization was carried unanimously. After the reading by Mrs. Bush, of the formulated constitution of District No. 1, of Illinois, a like constitution was adopted, differing only in the date of the meetings, the regular meeting to be held the first Tuesday of every second month. The following officers were elected: president, Ida E. Vanner; vice-presidents, Clara L. Harman, Mabel Kambrick; recording secretary, Alice Dally; corresponding secretary, Lucy A. Mount; treasurer, Mabel Reid.

The 12th District Association of the Illinois Association of Graduate Nurses met at the Y. W. C. A. Tuesday, June 2, 1913. The Executive Board met at 10.30 A.M., for some necessary work. Luncheon at 12 o'clock. Misses Eldridge and Walsh, of Chicago, were present and gave very interesting talks on State Registration, and State Association work. Afternoon session at 1.30, with Ida E. Vanner, president, in the chair.

Dr. Chas. Fatten talked on State Registration from a physician's point of view, also what other states are doing; Miss Vanner, Discussion on State Registration from the hospital superintendent's point of view. A splendid report of the state meeting at Dixon, Ill., was read from Margaret J. Mount, delegate from 12th District. Thirty-five nurses were present.

THE PASCANANT MEMORIAL HOSPITAL TRAINING SCHOOL FOR NURSES held graduating exercises of the class of 1913 in the chapel of the hospital on the evening of June 2. Eight young women received diplomas. Dr. A. L. Adams, president of the staff, presided. Addresses were given by Rev. W. L. Dungan, of the First Baptist Church, and Mary C. Wheeler, Chicago. Dr. Carl E. Black, dean of the school, presented the diplomas. Ida E. Vanner, Superintendent of Nurses, presented the class pins.

On the evening of June 3, at the Pines Inn, the alumni association of the hospital gave a banquet in honor of the graduating class. Charlotte Harman presided. The honored guests present were: Mary C. Wheeler, Chicago, and Ida E. Vanner, Superintendent of Nurses. Miss Mount welcomed the class into the association. Irene Montgomery responded to the words of welcome for the class. Greetings from absent members by Miss De Pew. Miss Wheeler gave a very interesting and helpful talk. A vote of thanks was given her by the association.

PEORIA.—ON MAY 29th the ten members of the 1913 graduating class of the J. C. Frecker Hospital were guests of the Alumni Association at a Casino party at the Orpheum, followed by the annual banquet given at the Jefferson Hotel. Miss Glover, president of the alumni, gave the address of welcome; response by Miss Starna, the president of the 1913 class. Toasts were given by the members of the class and a number of the alumni, Miss Leach acting as toastmistress.

Commencement exercises were held the following evening at the First Congregational Church. The address was delivered by the Rev. M. L. Pontius, and the diploma presented by Dr. J. C. Roberts.

THE J. C. PROCTOR HOSPITAL ALUMNAE ASSOCIATION gave their annual boat excursion on June 8th. Music, dancing and several selections rendered by the "Duchess" Quartette were thoroughly enjoyed by all.

Proceeds to go to the "Sick Benefit Fund."

THE REGULAR MONTHLY MEETING of the J. C. Proctor Hospital Alumnae Association was held on Wednesday, June 11, Miss Glover presiding. After two very interesting papers on "Nursing Ethics," given by Miss Hotchkiss and Miss Brown, and a general discussion of the subject, the following officers were elected: president, Grace West; vice-president, Rose Feibl; secretary, Agnes Newbold, 400 Sixth Ave.; treasurer, Barbara Glover.

DIVISION No. 7 of the Illinois State Association held its third regular meeting on May 2, at the Y. W. C. A., Peoria, Miss Charlesworth presiding. After a short business session, at which it was decided to affiliate with the Child's Welfare League and Mary Youngren appointed representative, the nurses assembled in the dining room and dinner was served. Thirty-two members were present and thoroughly enjoyed the address by Dr. Babcock McLeay and the social hour which followed.

IOWA

THE IOWA STATE BOARD OF NURSE EXAMINERS held a special examination in Des Moines, May 19, 20 and 21, for nurses who had not complied with the State law. Forty-one applicants were present. The next examination will be held at the capital, in Des Moines, July 29, 30 and 31. Applications should be filed with Dr. Guilford H. Sumner, Capitol Building, Des Moines, two weeks prior to date of examination.

NORTH DAKOTA

Northwood.—THE DRACONIAN HOSPITAL TRAINING SCHOOL for nurses held its annual graduating exercises May 19. Four nurses received diplomas. During the year the older graduates had formed an alumnae, whose members on May 20, tendered a banquet to the graduating class.

Maryann Olson, class 1922, Luther Draconian Hospital School for Nurses, has accepted a position in the North Western Hospital, Moorhead, Minn., having resigned her position in the Northwood Hospital.

University of North Dakota.—Three students of the nursing course have completed the year's work at the university, and are now ready to enter the affiliated hospital training schools for nurses.

Grand Forks.—MINNIE SUTTON is elected delegate to the convention of the American Nurses' Association from the Grand Forks County Association.

THE GRAND FORKS COUNTY NURSES' ASSOCIATION held its usual monthly meeting, May 12, in the parlors of the Y. W. C. A. This meeting was dedicated to Florence Nightingale, in honor of her birthday. Two students of the nursing course at the University of North Dakota contributed to this,

Miss Covert giving a sketch of Miss Nightingale, her aspirations, her work in the Crimea amongst the soldiers and her home life in England. Miss Springett read some extracts from the "History of Nursing," dealing with her strong desire for hospital improvement and the better housing of nurses. Bertha Erdmann had some interesting pictures to show of St. Thomas' Hospital in London. The attendance was fair, almost every nurse being on duty. The registrar's report showed a greater demand for nurses than in any previous month.

THE RED CROSS LOCAL COMMITTEE met on May 17 for the monthly meeting. Two applications were approved. Since its appointment by the state committee, three nurses have received their badges and appointment cards.

MONTANA

THE BOARD OF NURSE EXAMINERS held a meeting in Helena on May 28.

WISCONSIN

Wausau.—THE MILWAUKEE COUNTY HOSPITAL TRAINING SCHOOL held graduating exercises on the evening of May 29 for a class of 11 nurses. The address was given by Mary C. Wheeler, of Chicago. Mary C. Good presented the award of \$5 in gold offered by the Class of 1912 for the best paper on a subject to be chosen by the officers of the school. "Present Day Opportunities for Nurses" was selected for the subject for this year. Four additional awards were provided for the development of nurses along original lines. Any aid to the science or art of nursing will be the basis, one prize for each of the classes and one open to members of the school as a whole. The donor remains anonymous. The five prizes will be offered yearly. A reception followed the exercises.

Milwaukee.—AT THE LAST QUARTERLY MEETING of the Nurses Alumni of St. Joseph's Hospital it was decided to establish a fund for the benefit of sick or disabled nurses. Various plans for the establishing of this fund were made, the first being a dancing party, which was held at the Colonial Hall, Tuesday evening, May 27. This was largely attended by the medical profession and friends of the nurses. Members of the senior class of the Training School attended in a body. Both socially and financially it proved a success and all present spent an enjoyable evening.

MINNESOTA

St. Paul.—THE REGULAR MEETING OF RAMSEY COUNTY REGISTERED NURSES ASSOCIATION was held at 25 Anson Avenue, Monday, June 2, the president in the chair. Mrs. White, delegate to National Association, was instructed about voting. Mrs. Glaser, matron of the Industrial Work Room of the Buford, told about her work. A social time followed.

BARBARA HARRIS, graduate St. Joseph Hospital, St. Paul, has accepted position of visiting nurse in Fargo, North Dakota. Miss Harris made a four months' survey in Becker County, Minn., in the work of the Anti-Tuberculosis Campaign in Minnesota.

THE EXECUTIVE BOARD MINNESOTA STATE GRADUATE NURSES' ASSOCIATION,

the evening before the semi-annual meeting of the Minnesota State Nurses' Association, invited the Superintendents of Training Schools, Presidents of Auxilia, Presidents of County Associations, and the Nurse Board of Examiners, to meet at a dinner given at the Commercial Club Rooms, St. Paul, at 6.30 P.M., April 22, 1913, to discuss co-operation in the nursing profession. Plates were laid for twenty-five.

Minneapolis.—THE REGULAR SEMI-ANNUAL MEETING of the Minnesota State Graduate Nurses' Association was held at Donaldson's, Minneapolis, April 24, 12.30 P.M. Plates were laid for ninety-one, the tables were prettily decorated with red and white tulips. Mrs. E. W. Stahr, president of the Association, opened the discussion—"Co-operation in the Nursing Profession"—followed by Mrs. Campbell, superintendent of City Hospital, St. Paul; Miss Powell, superintendent Minnesota University Hospital. Every one enjoyed the session. Rochester, Minn., sent an invitation for the State Association to hold the next meeting in their city. It was accepted.

St. Mary's HOSPITAL ALUMNAE held its annual meeting June 4, at the nurses' home. The following officers were elected: Julia O'Connor, president; Mrs. O'Ding, Clara Busch, vice-presidents; Cecelia Burns, recording secretary; Miss Bertha Blum, corresponding secretary; Miss Anna Verbeck, treasurer; executive committee: Helen Burke, Mary Mackley, Viola Wallace.

MISSOURI

KANSAS City.—THE KANSAS CITY GRADUATE NURSES' ASSOCIATION entertained informally on June 4 in honor of the graduates of 1913, of the different training schools of the city. The rooms were adorned with pennants and motions presented by different schools and classes. To add to the permanent attractiveness of the club rooms, the graduates were asked to present their class pictures framed.

THE GRADUATING CLASS OF ST. JOSEPH'S TRAINING SCHOOL held its commencement exercises on the afternoon of May 29. Dr. J. D. Griffith, in his address, urged them, as individuals, to identify themselves with their local organizations at once, upon leaving the hospital and then to lose no time in joining the state association and other bodies that have for their purpose the benefit of the nursing profession and those dependent upon it. The talk was inspiring and will not fail of good results. Dr. Franklin B. Murphy presented diplomas to seventeen graduates.

St. LOUIS'S HOSPITAL TRAINING SCHOOL held its graduating exercises Wednesday evening, May 29, on the hospital lawn.

Rev. E. H. Spencer delivered an address to the class.

Diplomas were presented by the Rt. Rev. E. C. Partridge. Envelopes were conferred with ceremonies in which Bishop Partridge "turned the sod" for the new addition to be built to the hospital this summer.

THE NURSE ANNUAL COMMENCEMENT of the General Hospital Training School for Nurses was held at 8 o'clock, May 31, in the Assembly Hall of the hospital. Commencement services were delivered by Rev. Frank S. Arnold, Sunday, May 19, 4 P.M., in the Assembly Hall.

Lansdown to Meyer and Hospital Board, Tuesday, May 20, 1 A.M., in the training school parlors. Annual meeting of the alumni association, Thursday, May 22, 9 A.M., Assembly Hall.

The class numbered only three. This small number was due to this being the first class to graduate under the three years training.

James Brown, graduate of South Side Hospital, is in charge of a new baby clinic recently established at 4211 E. Fifteenth Street. In the first week of its existence the clinic distributed fifty-two quarts of specially modified milk to sick babies and on the second clinic day twenty-seven babies were taken to Dr. E. H. Schurz.

St. Louis.—At the ANNUAL MEETING of the St. Louis League of Nursing Education held at St. Luke's Hospital, June 14, steps were taken to organize a state league.

St. Louis's HARMAN THOMPSON SUMMER graduating exercises were held at the hospital, Tuesday evening, May 20, for a class of twelve. Address of the evening was given by Rev. B. F. Kammern.

Diplomas were conferred by the Rt. Rev. Daniel S. Tuttle.

School plans were presented by Miss Davis.

Refreshments and a social hour were enjoyed, after which the nurses and their friends enjoyed a dance at the nurses' home.

On THOMPSON SUMMER, May 21, the alumni association gave a banquet to the graduating class at the Hamilton Hotel. The welcome address to the class was given by Margaret McClure. Response in behalf of the class was given by Miss M. F. Hedden. The honored guests of the evening were Miss Chappel, superintendent of the hospital; Miss Davis, superintendent of the training school; and Miss Jennings, assistant superintendent.

THE JEWELL HARMAN THOMPSON SUMMER graduating exercises were held in Temple Israel, Saturday evening, May 24. Five young women received diplomas. Addresses were made by Dr. Herman Tahakshi and Rabbi Leon Horvitz. The diplomas were conferred by Mr. David Horman, president of the hospital board. Margaret Rogers, superintendent at the hospital, presented the plan. The alumni society gave a banquet to the graduating class, Thursday evening, May 22, at the Flanigan Hotel. Mrs. Haskins, president of the alumni society, welcomed the class to the ranks of the profession, and invited the nurses to join the alumni at once. Mrs. Warner responded for the class. After dinner speeches were dispensed with, and the nurses indulged in games till midnight.

THE CHRISTIAN HARMAN THOMPSON SUMMER held their eighth annual graduating exercises at the Young Women's Christian Association Hall, Friday evening, May 23. Twelve young women received diplomas. Addresses were given by Rev. John L. Broadb, Dr. Otto Geller and Dr. John W. Hirsch. Dr. A. R. Kiefer, dean of the medical staff, presented the diplomas. William H. Evans, superintendent of nurses, presented the plan. Clara B. Sharpe, superintendent of the hospital, conferred the insignia. Several musical numbers were given, after which refreshments were served to the audience. On Wednesday evening, May 22, Clara B. Sharpe, superintendent of the Christian Hospital, entertained the graduating class and members of the alumni in the parlors of

the hospital. Miss Sharpe gave the nurses a talk on the importance of becoming members of the Central Directory and State Association. Refreshments were served.

THE ANNUAL MEETING of the Bethesda Alumni Association was held at the rooms of the Young Women's Christian Association June 9, at 3 P.M. The following officers were elected: president, Eunice Wright; vice-president, Bertha Hamilton; secretary, Dora B. Burkhardt; treasurer, Vida Wilson. Following this meeting the alumni gave a banquet to the graduating class.

WASHINGTON UNIVERSITY HOSPITAL TRAINING SCHOOL graduating exercises were held June 12, at the hospital. Prof. Marshall Snow of the Washington University gave the address. Dr. Henry Schwartz awarded the diplomas to a class of seven. Lottie A. Darling, principal of the training school, presented the school plan.

THE SUMMER HOSPITAL TRAINING SCHOOL graduating exercises were held at the hospital June 5, at 3 P.M. Five young women received diplomas. Addresses were made by Rev. J. H. Gano and Dr. Mary E. McLean, who also presented the diplomas. Mrs. R. Haynes, director of the institution, presented the class plan.

THE NEXT REGULAR meeting of the graduate nurses association will be held the third Monday in September. Nominations for officers will be in order.

CHAS. B. SHARPE, for seven years superintendent at the Christian Hospital, has tendered her resignation to take effect July 1. Miss Sharpe will go to her home in Canada for a much needed rest.

TENNESSEE

Memphis.—THE MINNERS CITY HOSPITAL staff of pupil nurses is to be increased in number sixty per cent. An isolation hospital for acute eruptive fevers has recently been added to the hospital and the erection of a children's hospital on the grounds is under consideration, which will no doubt be in operation within the next twelve months; all pupil nurses are entitled to service in these new departments. Lecturers to the training school are selected from the faculty of the University of Tennessee Medical College.

MISSISSIPPI

Hattiesburg.—THE COMMEMORATIVE EXERCISES of the training school for nurses connected with the Hattiesburg Hospital occurred Tuesday evening, May 24, at the Forest Club. The addresses to the graduates were given by Dr. Mac F. Jones and Rev. G. H. Callaway.

Before administering the Nightingale Pledge to the class, the superintendent, Jennie M. Quinn, made a short though very impressive address in which she urged them to live up to the precepts of the pledge. Dr. T. R. Ross, president of board of directors, presented the diplomas and class plan. The music was in charge of Miss Stephens, of the Mississippi Woman's College. An informal reception was tendered the graduates at the close of the exercises. This event

was of especial interest as these were the first nurses' commencement exercises to be held in South Mississippi. Miss Quinn, the superintendent, is a well known trained nurse of Sumner, Pa., where she practiced her profession many years, before leaving in the South.

SOUTH CAROLINA

THE SOUTH CAROLINA GRADUATE NURSES' ASSOCIATION held its seventh annual convention at Charleston, April 29-30. Miss A. Trumbull, of Columbia, president of the association, presided. There were 75 members present to answer the roll call. At this meeting 57 new members were admitted, making a total membership of 171, all registered nurses of the state. Miss A. E. Ogden welcomed the visiting nurses in the name of The Charleston Association of Graduate Nurses. Miss Ogden spoke of the good work of the State Association and of the great field before it. The response was made by Miss Strider, of Charleston, expressing appreciation for the kind words of welcome and the great pleasure felt by all the visitors in coming to Charleston. Miss Trumbull delivered her annual address, giving a brief history of the organization of the association and outlining its present aims, chief among which is the elevation of the educational standards of the profession. She described the fight which was made to get the registration bill through the Legislature. The passage of this bill was obtained in 1911, the principal feature being the requirement for registration. The association was particularly favored in having an address by Dr. R. E. Culbert who spoke of the trained nurse from a physician's viewpoint. In closing his address, Dr. Culbert said that he considered the trained nurse the greatest asset to surgery since the days of Lord Liston, the father of antiseptic surgery. Miss McKenna read a most valuable and interesting paper in which she ardently advocated raising the educational standards of the profession. Miss E. F. Palmer, editor-in-chief of the *American Journal of Nursing*, the guest of honor at this meeting, gave much valuable information to the nurses and enlightened them in many matters and they feel that their deepest gratitude will always be here for her presence and advice. The papers read by members of the association were very much enjoyed and the discussions which followed the reading were beneficial to all whose privilege it was to hear them. The following officers were elected to serve for the coming year: president, Miss M. A. Trumbull, Columbia; vice-presidents, Miss F. A. Strider, Charleston, Miss E. F. Herd, Columbia; treasurer, Miss F. J. Baker, Charleston; secretary, Miss A. E. Ogden, Charleston. Miss Trumbull and Miss E. W. Davis were appointed delegates to the American Nurses' Association. Accepting the invitation of Miss Eddy, of Lawrence, the association will hold its eighth annual meeting in Lawrence, in April, 1914. The social features of the convention were well attended and much enjoyed and on the whole the members feel that they had a most successful meeting in every way and further that the transactions of this meeting will act as an incentive and inspiration to expedite the good work for which they were organized.

ALABAMA

THE FINAL MEETING of the Eleanor Ford, one of Birmingham's oldest history clubs, was held during the past week at the residence of its president, Miss Lenna H. Denny. About fifty were present, many being representatives from other clubs. An educational program was carried out. Among others, Dr. Chet Lull spoke on "Educational Standards for Nurses," pointing out the necessity for Alabama to get into line with other states in registration and training school inspection. It is hoped that each representative will report to her club the gist of Dr. Lull's talk, and that the federated clubs of Alabama will stand by the nurses in their work for registration.

Birmingham.—St. VINCENT'S HOSPITAL held graduating exercises on the evening of May 6. The program was unusually attractive, being varied by addresses from doctors, music, and presentation of diplomas. Each member of the class received a medal. A special hour followed.

THE AMERICAN ASSOCIATION OF St. VINCENT'S HOSPITAL held its annual picnic on May 12, at East Lake Park. Thirty members were present. The park management, in compliment to the nurses, gave free admission to all attractions. The nurses took advantage of all privileges, and carried home memories of a delightfully happy day.

THE ALABAMA NECTAROLOGICAL CONGRESS, at a recent meeting, passed resolutions recommending the proposed bill for registration of nurses in the state.

THE GRADUATE NURSES' ASSOCIATION held its monthly meeting at the Hillman Hospital on May 14. The chief topic for discussion was the revision of the constitution. Helen Macken was elected delegate to the American Nurses' Association.

KANSAS

Topeka.—CHRIST'S HOSPITAL TRAINING SCHOOL ALUMNAE ASSOCIATION gave a luncheon at Mills Tea Room Monday, complimentary to members of the graduating class of 1913. After the luncheon, the annual meeting and election of officers was held at Christ's Hospital. The following officers were elected: Miss Pearson, president; Miss Youngblood, vice-president; Miss Ingwood, secretary; Miss Palmatier, treasurer; Bishop Kilgus, Dr. McClintock, and Dunn Kaye, were re-elected members of the Board of Directors, and the new members of the Board are Miss Walker, of Topeka, Kans., Miss Pearson, Miss Ingwood, and Miss Kibbi. Miss Martin was elected a delegate, and Miss Ross alternate to attend the annual meeting of the Kansas State Association of Graduate Nurses, at Hutchinson, in October. At 3 P.M. the graduating address was given by the Very Reverend James P. de Bruyn Kaye, Dean of Grace Cathedral, and Manager and Chaplain of Christ's Hospital. Other classes have been addressed by noted doctors from other cities and states, but this class wisely chose their own chaplain. Being so closely associated with the nurses in their work at Christ's Hospital, it seemed especially appropriate for him to deliver this address. Right Reverend Frank Rudolph Kilgus, Bishop of Kansas, gave the nurses their diplomas and pins. It was a great pleasure to have the Bishop present, and to know that he had so far recovered from his illness as to be able to attend the services at the Cathedral, and the reception which followed. There were present 57 nurses in uniform, including graduates and nurses in training. After the services at the Cathedral, a reception was given at the

Denary, by Dean Rags, assisted by Mrs. McElisack, Mrs. Millspaugh, Mrs. Hubner of Omaha, Nebraska, Mrs. Lindsay, Mrs. Henningsen, and Mrs. Stone. Owing to the recent illness of Mrs. Rags, she was unable to be present, and was greatly missed.

COLORADO

A **CONVENTION**.—The Denver correspondence of the *Journal* wishes to correct an item which appeared in the May issue, which stated that Miss Lake had resigned from the Beth-El Hospital of Colorado Springs, and that she had been succeeded by Miss E. Gardner. Miss Lake was head nurse of the children's ward, and Miss Gardner does not succeed to that position, but has been appointed superintendent of nurses of the hospital, with Miss Goodenough as her assistant. Miss M. Latham takes the position in the children's ward.

TEXAS

Galveston.—THE BOARD OF NURSE EXAMINERS for the state of Texas held its regular meeting at Dallas, May 7 and 8. Forty-seven nurses took the examinations. Of this number, nineteen passed in all subjects and were granted certificates of registration. Thirty-eight were eligible for registration under the waiver, making a total of six hundred and ninety-nine registered nurses in the state.

OKLAHOMA

Oklahoma City.—THE OKLAHOMA STATE BOARD FOR EXAMINATIONS AND REGISTRATION OF NURSES held a meeting June 2-4 at St. Anthony's Hospital. There were sixty applicants for registration. Mrs. Marjorie Morrison, R.N., president, and Mabel Garrison, R.N., secretary, were re-elected at this meeting.

UTAH

Salt Lake City.—St. Mark's Episcopal held graduating exercises at St. Mark's Cathedral on April 24, when nine nurses received diplomas, which were presented by Bishop Spaulding. After the exercises a reception was held at the Ladies' Literary Club.

THE CITY NURSES' ASSOCIATION held its quarterly meeting on June 8. A business session for discussion in regard to forming a state association was followed by a social hour.

CALIFORNIA

Sacramento.—THE NURSES' CENTRAL DIRECTORY AND CLUB of Sacramento was incorporated with Mrs. A. E. Glover as president; Anna Elizabeth Wills, vice-president; and Alma Dubois, secretary and treasurer. The directory and club are so incorporated that there will be scarcely any limitation to what the nurses may do, not only to better their own condition, but also that of others. Many of the nurses on this directory have been connected with some of the greatest social service movements in America and already much quiet but effective work has been done by them. A club house is one of the plans which, it is hoped, will be worked out in the near future.

BIRTHS

On May 10, a son to Doctor and Mrs. L. B. Robinson. Mrs. Robinson was Edna B. Jamison, class 1908, City Hospital, Minneapolis, Minn.

On May 11, at Lockport, N. Y., a son, William Edward, to Mr. and Mrs. Francis John Hilderman. Mrs. Hilderman was Maude Evelyn Train, class of 1908, Rochester General Hospital.

On April 18, in Lawton, Ok., a daughter to Mr. and Mrs. Fritch. Mrs. Fritch was Nellie McGilford, class of 1907, Procter Hospital, Peoria, Ill.

On April 20, to Mr. and Mrs. Bridgman, a daughter, Ilean Hineboth. Mrs. Bridgman was Nellie North, class of 1908, Procter Hospital, Peoria, Ill.

On April 22, in Benton, Miss., a son, to Mr. and Mrs. L. R. Johnson. Mrs. Johnson was Rosa E. Clager, class of 1908, Wesley Hospital, Chicago.

On May 4, at Huntington, Ind., a son, to Mrs. and Mrs. George McCoughan. Mrs. McCoughan was Elva Miller, class of 1908, Lutheran Hospital, Ft. Wayne, Ind.

On May 24, a daughter to Mr. and Mrs. A. B. Snow of Anacosta, Mont. Mrs. Snow was Miss Tracy Wood, class 1911, Charleston General Hospital, W. Va.

MARRIAGES

On June 4, Minnie Josephine Olson, class 1912, of Milwaukee County Hospital Training School for Nurses, and Dr. John Barlow James. Dr. and Mrs. James will live in Fargo, North Dakota.

Mae Kavanagh, graduate St. Joseph's Hospital, St. Paul, to Theo. W. Clifford. At home after May 16, New Prague, Minn.

At Dallas, Texas, May, 1912, Audrey Henderson, University of Texas School for Nurses, class 1912, to Dr. Augustus J. Hansen.

At Farmhouse, Brazil, April 17, Mary Alice Divron, graduate of the Troy Hospital, to Charles J. Sewart, of Brooklyn, N. Y.

At Brooklyn, on May 22, Ann Richard, class of 1910, Long Island College Hospital, to Ernest Eriedy. Mr. and Mrs. Eriedy will live in Indianapolis.

On May 23, Myrtle H. Weaver, class 1904, Presbyterian Hospital, Philadelphia, to Dr. Robert A. Glenn. Dr. and Mrs. Glenn will reside in Oakland, Cal.

On May 24, Loretta E. Bechtel, graduate Galt-General Hospital, Galt, Ontario, to Alonzo Laine. Mr. and Mrs. Laine are spending the summer at Atlantic City and will be at home after September 1, at 64 Queen Street, South Hamilton, Ontario. Mrs. Laine for the past two years has been superintendent of Hill Memorial Hospital, Bensalem, Kan.

On June 2, in Detroit, Mich., Agnes Lannon, class of 1906, St. Mary's Hospital, to Emil Wolf. Mr. and Mrs. Wolf will live in Detroit.

On June 4, at Chitten Springs, N. Y., Mary E. Whiston, graduate of Rochester General Hospital, class of 1912, to Herman E. Hendrick, of South Haven, Mich. Mrs. and Mrs. Hendrick will live in South Haven.

On May 4, at All Saint's Church, Wagon Falls, Edith Louisa England, class of 1904, Rochester General Hospital, to Harcourt John Murphy. Mr. and Mrs. Murphy will live at Wagon Falls, Canada.

On March 9, at Los Angeles, Cal., Myra Eva Hummel, R.N., class 1908, Protestant Episcopal Hospital in Philadelphia, to Trevor Thomas.

On April 9, at Philadelphia, Lela Minerva Hight, R.N., class 1909, Protestant Episcopal Hospital in Philadelphia, to Thomas F. O'Donnell. Mr. and Mrs. O'Donnell will live at 4291 N. 5th Street, Philadelphia, Pa.

On June 16, at their own home on Broadway, Indianapolis, Mary Montgomery, R.N., Protestant Dispensary Hospital, 1910, to Albert Stevenson.

On May 16, Nester Rhinchart, R.N., Protestant Dispensary Hospital, 1911, to John Rota. They will reside in Indianapolis.

On April 26, Annie E. King, class of 1909, Maryland University Hospital, Baltimore, to Frederick W. Helling, of Elbridge, Md.

On May 17, at East Berkeley, Cal., Louise Martin, class of 1909, City Hospital School for Nurses, Whiting, W. Va., to John L. Shaber. For more than a year after her graduation Miss Martin held the position of surgical nurse at the City Hospital. She had recently held the position of head surgical nurse in the hospital at Maricopa, Cal. Mr. and Mrs. Shaber will live in California.

On April 22, at Chardon, Ohio, Mary A. Kline, class of 1909, St. Vincent's Charity Hospital, Cleveland, to John Hunk.

On June 4, at Middletown, Conn., Mary E. Dunn, class of 1912, St. Francis Hospital Training School for Nurses, Hartford, to Claude V. Fisharty, M.D. Dr. and Mrs. Fisharty will live in Hartford.

On June 2, at Providence, R. I., Beulah Adell Wharton to Dr. Axel Edzell Shumacher. Miss Wharton is a graduate of Bellevue Hospital, class of 1909. Dr. and Mrs. Shumacher will reside at Attitash Falls.

DEATHS

On May 14, Lella Everett Dunn, class of 1911, Gray Street Infirmary, Louisville, Ky. Miss Dunn was a woman of charming personality, and her death, after only two days' illness, was a shock to her many friends.

At Washington, D. C., Clara E. Sedgwick, class of 1912, of the South University Hospital, Philadelphia.

On May 25, at 505 Grand Central, New York, George Mrs. Bell, class of 1911, University Hospital, New York City.

devotion. Interment was in Field Cemetery, those who bore her to the last resting place being physicians who had worked with her, according to her wish. In Miss Hall the nursing profession has lost an honored and able member, the medical profession a most faithful and competent assistant and her sorrowing family a devoted daughter and sister. She stood shoulder to shoulder with Miss Manning, the superintendent of the hospital, through all the weary and trying campaigns of which a nurse's duties are made up, performing her work in a manner to win commendation alike from the medical profession, and from the many suffering ones to whom her tender ministrations were as a balm from heaven. The place she left will be hard to fill. She found in the practice of her humane profession, and in her love and devotion to her chief, full and satisfying reward for her labor. Her devoted life, and her calm and fearless facing of the approach of death, are proof that a faithful life, spent in unselfish service of humanity, is its own reward.

On April 9, at Philadelphia, Lela Minerva Height, R.N., class 1908, Protestant Episcopal Hospital in Philadelphia, to Thomas P. O'Donnell. Mr. and Mrs. O'Donnell will live at 4831 N. 5th Street, Philadelphia, Pa.

On June 16, at their own home on Broadway, Indianapolis, Mary Montgomery, R.N., Protestant Deaconess Hospital, 1910, to Albert Stevenson.

On May 15, Nester Rhinehart, R.N., Protestant Deaconess Hospital, 1911, to John Rotz. They will reside in Indianapolis.

On April 20, Annie E. King, class of 1908, Maryland University Hospital, Baltimore, to Frederick W. Sailing, of Elkridge, Md.

On May 17, at East Bakersfield, Cal., Louise Martin, class of 1908, City Hospital School for Nurses, Wheeling, W. Va., to John L. Shafer. For more than a year after her graduation Miss Martin held the position of surgical nurse at the City Hospital. She had recently held the position of head surgical nurse in the hospital at Maricopa, Cal. Mr. and Mrs. Shafer will live in California.

On April 23, at Chardon, Ohio, Mary A. Klema, class of 1908, St. Vincent's Charity Hospital, Cleveland, to John Henke.

On June 4, at Middletown, Conn., Mary E. Duane, class of 1912, St. Francis Hospital Training School for Nurses, Hartford, to Claude V. Flaherty, M.D. Dr. and Mrs. Flaherty will live in Hartford.

On June 2, at Providence, R. I., Bonnie Adell Whenton to Dr. Anna Badell Shoemaker. Miss Whenton is a graduate of Bellevue Hospital, class of 1910. Dr. and Mrs. Shoemaker will reside at Attleboro Falls.

DEATHS

On May 14, Lellie Barrett Evans, class of 1904, Gray Street Infirmary, Louisville, Ky. Miss Evans was a woman of charming personality, and her death, after only two days' illness, was a shock to her many friends.

At Washington, D. C., Clara M. Parkhurst, class of 1902, of the Jewish Maternity Hospital, Philadelphia.

On May 12, at Reid General Hospital, Reid, Ohio, Georgia Elva Noff, class of 1910, University Hospital, Reid. Miss Noff was born at Belle Plaine, Iowa. Her family came to Oklahoma about six years ago. Miss Noff, at the time of her death, was resident nurse at the Reid General Hospital, having taken service under Miss Dunning, the superintendent, at the time of its organization, and having remained her professional associate and close friend ever since. She was registered in Oklahoma. Her illness, from duodenal ulcer, began about a year ago, but she continued her duties. After two operations death came as a welcome relief from suffering well-nigh unendurable, yet with her it was a calm steadfast patient fight for life throughout those endless days and nights. The entire nursing staff of both the General and University Hospitals, and all nurses in the city whose duties permitted, were in attendance at her funeral. The funeral women gave a touching tribute to her life of unselfish

devotion. Interment was in Knid Cemetery, those who bore her to the last resting place being physicians who had worked with her, according to her wish. In Miss Nell the nursing profession has lost an honored and able member, the medical profession a most faithful and competent assistant and her sorrowing family a devoted daughter and sister. She stood shoulder to shoulder with Miss Dunning, the superintendent of the hospital, through all the weary and trying emergencies of which a nurse's duties are made up, performing her work in a manner to win commendation alike from the medical profession, and from the many suffering ones to whom her tender ministrations were as a boon from heaven. The place she left will be hard to fill. She found in the practice of her humane profession, and in her love and devotion to her chief, full and satisfying reward for her labor. Her devoted life, and her calm and fearless facing of the approach of death, are proof that a faithful life, spent in unselfish service of humanity, is its own reward.

BOOK REVIEWS

IN CHARGE OF

M. R. CAMERON, R.N.

DISEASES OF CHILDREN. A Practical Treatise on Diagnosis and Treatment. For the Use of Students and Practitioners of Medicine. By Benjamin Knox Bachford, Professor of Diseases of Children, Ohio Miami Medical College; Department of Medicine of the University of Cincinnati; Pediatrician to the Cincinnati Hospital and to the Jewish Hospital; ex-president of the American Pediatric Society and Member of the Association of American Physicians. Price, \$6.00. D. Appleton & Co., New York and London.

This book belongs only in the reference library for nurses; as its title indicates that it is concerned with diagnosis and treatment. The book analyzes the normal child and the child in disease, covering the subject with minute care through all its branches.

SURGICAL NURSING AND HOSPITAL TECHNIC. By C. A. Howell, M.D., Member of the Columbus Academy of Medicine, of the Ohio State Medical Society, of the American Medical Association. Visiting Surgeon to the Grant Hospital. Published by the Author, 70 First Avenue, Columbus, Ohio.

Delivered in the form of lectures to the nurses of the Grant Hospital, of the Protestant Hospital, and of the State Hospital of Columbus—this book is given in what may almost be considered an *édition de luxe*—with its many half-tone illustrations, its extremely heavy paper and excellent binding. It gives us surgical nursing from the surgeon's point of view and contains the latest word on surgical technic and the ideal operating-room.

The writer is entirely in sympathy with the struggle for higher education for nurses. He believes that while discipline may and does form an important feature of the training of the nurse that she must also have the best teaching in theoretic work as well as in practical. He states emphatically that in the preparation for the work of guarding and protecting human life there should be no place for the fear of over-edu-

cation; and furthermore that it is his own conviction that "the well-informed nurse is one of the greatest assets that a surgeon can possess."

The author begins with sketches of the life of Florence Nightingale; the rise of the Red Cross Society; the dawn of antiseptics, as though he would have the nurse bear in mind that her profession is not devoid of opportunities for attaining fame—and for place in the forward movement of the world. Apart from its value as a text-book this work will make good reading, for it contains much to stimulate and encourage those who are engaged in the practice of nursing.

APPLIED BACTERIOLOGY FOR NURSES. By Charles F. Boldnan, M.D., Assistant Medical Officer, Department of Health of the City of New York, and Marie Grund, M.D., Bacteriologist, Department of Health of the City of New York. Price, \$1.25 net. W. B. Saunders Company, Philadelphia, London.

Teachers and students of bacteriology will find in this book a valuable aid to the study of the topic. It is arranged to go hand in hand with practical demonstrations, suggestions for which are to be found at the end of each chapter.

The following extract from the preface seems to convey exactly the character of the book and the uses for which it was designed: "Bacteriology dominates so large a part of the art of nursing that a correct understanding of the more important facts and principles of that science is an indispensable part of every nurse's mental equipment. In the following pages emphasis has been laid on the immediate application of the subject to nursing, and only enough general bacteriology has been introduced to give the student a clear conception of the principles underlying her work."

The ordinary modes of transmission of disease due to infection are thoroughly discussed; the practice of disinfection by different forms of heat, as steam, hot water, dry heat; also by chemicals; the collection of material for bacteriological examination, the proper manner of handling the same are given in detail; but the authors call attention to the need of extensive practical demonstration work and laboratory exercises for the student.

OFFICIAL DIRECTORY

The American Journal of Nursing Company.—President, Clara D. Hayes, R.N., Bellevue Hospital, New York, N. Y. Secretary, Minnie M. Abrams, R.N., 104 South Michigan Avenue, Chicago, Ill.

The American Nurses' Association.—First Vice-president, Isabel McMane, R.N., Room 345½, War Department, Washington, D. C. Secretary, Agnes G. Dunn, 868 Brush St., Detroit, Mich. Treasurer, Mrs. C. V. Twin, 419 West 146th Street, New York, N. Y. Annual meeting to be held in Atlantic City, June 29-27, 1912.

The National League for Nursing Education.—President, Mary C. Wheeler, R.N., 127 North Dearborn Street, Chicago, Ill. Secretary, Jennie E. Cotton, Springfield Hospital, Springfield, Mass. Treasurer, Mary W. McKeehan, R.N., 420 West 116th St., New York City. Annual meeting to be held in Atlantic City, 1912.

The National Organization for Public Health Nursing.—President, Lillian D. Wald, R.N., 263 Henry Street, New York City. Secretary, Ella Phillips Crandall, R.N., 52 East Thirty-fourth Street, New York City.

Army Nurse Corps, U. S. A.—Isabel McMane, Room 345½ War Department, Washington, D. C.

Navy Nurse Corps, U. S. N.—Superintendent, Leah S. Hohen, M.I.A., R.N., Bureau of Medicine and Surgery, Department of the Navy, Washington, D. C.

Isabel Hampton Robb Memorial Committee.—Chairman, Isabel McMane, Room 345½ War Department, Washington, D. C. Treasurer, Mary M. Blakely, Newton Hospital, Newton Lower Falls, Mass.

Nurses' Relief Fund Committee.—Chairman, L. A. Gilman, R.N., 204 Street and Franklin Avenue, Philadelphia, Pa. Treasurer, M. Louise Twin, R.N., 419 West 146th Street, New York City.

Department of Nursing and Health, Teachers' College, New York.—Director, M. Adelaide Nutting, R.N., Teachers' College, Columbia University, 129th Street, New York City.

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Connecticut.—President, Mrs. Winifred Ann Hart, R.N., Bridgeport. Secretary, Mary C. McIlroy, R.N., 51 Wolcottfield Avenue, Hartford. President examining board, Emma L. Stone, New Haven Hospital, New Haven. Secretary, E. Ina Allbaugh, R.N., Pleasant Valley.

Delaware.—President, Mrs. Estelle Hall Spinkman, R.N., Claymont. Secretary, Amy Allen, R.N., 2428 West Street, Wilmington. President examining board, Harold L. Springer, M.D., 1012 Washington Street, Wilmington. Secretary and treasurer, Anna M. Mack, R.N., 522 West Ninth Street, Wilmington.

District of Columbia.—President, Estelle Wheeler, 1220 Calvert Street, Washington. Secretary-treasurer, Sadie Klier, 708 Seventh Street, N. W., Washington. President examining board, Lily Kandy, R.N., 1728 G Street, Washington. Secretary, Katherine Douglas, R.N., 418 East Capitol Street, Washington.

Florida.—President, Mary A. Baker, R.N., St. Luke's Hospital, Jacksonville. Secretary, Anna L. O'Brien, R.N., 25 East Second Street, Jacksonville.

Georgia.—President, Mrs. A. C. Hartridge, R.N., Pine Heights Sanatorium, Augusta. Corresponding secretary, Emma Davis, R.N., 1126 Greene Street,

Augusta. President examining board, Ella M. Johnston, R.N., 360 West Thirty-Sixth Street, Savannah. Secretary and treasurer, Emily R. Dandy, R.N., 822 Greene Street, Augusta.

Idaho. President, Mrs. Gertrude Craig, R.F.D. No. 1, Boise. Secretary, Lulu Hall, 410 Overland Building, Boise. President examining board, Lulu Hall, 410 Overland Building, Boise. Secretary-treasurer, Napiah Hanley, 360 Washington Street, Boise.

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